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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96 00008619 54

1. Corporation Name: Olympus Staffing Corporation

Principal Place of Business: Staffing Corporation

Mailing Address: 220 E. Madison Suite 1205 Tampa, Fl. 33602

3. Date Incorporated or Qualified: Oct 29, 1996

3a. Date of Last Report:

21 Principal Place of Business: 220 E. Madison

22 Suite, Apt. # etc.: Suite 1205

23 City & State: Tampa, Fl.

24 Zip: 33602 25 County: Hillsborough

26 Mailing Address: Same

27 Suite, Apt. # etc.:

28 City & State:

29 Zip: 30 County:

4. FEI Number: 59-3413542 — Applied For / Not Applicable

5. Certificate of Status Desired: $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: $5.00 May Be Added to Fees

8. This corporation has liability for examples tax under s. 199.032. Florida Surtaxes: Yes / No

9. Name and Address of Current Registered Agent:

J. Scott Taylor P.A.
2909 W. Bay to Bay Blvd.
Suite 403
Tampa, Fl. 33629-8177

10. Name and Address of New Registered Agent:

81 Name:

83 Street Address (P.O. Box Number is Not Acceptable):

85

84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1908, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: J. Scott Taylor

(Typed or printed name of registered agent) (Date) (Registered agent's office address)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mary Reeves Sud 220 E. Madison Suite 1205 Tampa, Fl. 33602 President — ☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Gregory L. Hughes 220 E. Madison Tampa, Fl. 33602 Vice President — ☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition 4/4/18/97
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition 600002148188 -04/18/97--01096--044 ***165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: J. Scott Taylor

SAMPLE FORM #14