

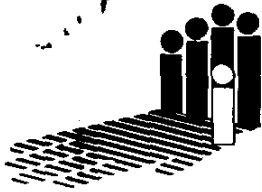
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Aug 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P9600010184 1. Corporation Name EMPLOYMENT PROFESSIONALS, INC.			
Principal Place of Business 1215 BAYSHORE GARDENS PKWY BRADENTON, FL 34207		Mailing Address 10105 OLD TAMPA RD. PARRISH, FL 34219	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 12/13/1994		4. FEI Number 06-0713250	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		10. Name and Address of New Registered Agent 81 Name DIANA DAVIS 82 Street Address (P.O. Box Number is Not Acceptable) 10105 OLD TAMPA RD. 83 City PARRISH FL 84 Zip Code 34219	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 DIANA DAVIS (NOTE: If a new agent, signature required when filing.) DIANA DAVIS 7/1/98			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE NAME STREET ADDRESS CITY-ST-ZIP 21 TITLE NAME STREET ADDRESS CITY-ST-ZIP 31 TITLE NAME STREET ADDRESS CITY-ST-ZIP 41 TITLE NAME STREET ADDRESS CITY-ST-ZIP 51 TITLE NAME STREET ADDRESS CITY-ST-ZIP 61 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
14. I 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.		800002620668 -08/20/98--01026--005 ***150.00	
SIGNATURE: DIANA DAVIS			

CR2E034 (10/97)

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HELPING HANDS
STAFFING SERVICES

July 3, 1998

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee FL 32302-1500

RE: 650713250 Filing Fee / Employment Professional Inc.

To whom it may concern,

Please find enclosed my filing fee of \$150.00. I never received my Annual Report renewal form and had to request a new one. I have been experiencing theft in my mail box. Please note my new mailing address. 10105 Old Tampa Rd Parrish FL 34219.

Thank You

Diana Davis

Diana Davis