

2-17-98 B 2/23 C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000004051 (3)

1. Corporation Name

BRISTOL STAFFING, INC.

Principal Place of Business

7240 W. POINT BLVD.
APT. 1127
ORLANDO FL 32835

Mailing Address

7240 W. POINT BLVD.
APT. 1127
ORLANDO FL 32835



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 900 Winderley Pl.		26 900 Winderley Pl.		01/09/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 Suite 104		27 Suite 104		58-2297679	
City & State		City & State		Applied For	
23 Maitland FL		28 Maitland FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 32751		29 32751		8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 Orange		30 Orange		Trust Fund Contribution	
				5.00 May Be Added to Fees	
				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

OSWALD, KENNETH F
600 COURTLAND STREET #110
ORLANDO FL 32804

10. Name and Address of New Registered Agent

81 Name	Phyllis E. Rhodes
82 Street Address (P.O. Box Number is Not Acceptable)	7240 Westpointe Blvd. #1127
83	
84 City	Orlando
85 Zip Code	FL 32835

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 Phyllis E. Rhodes, Phyllis E. Rhodes, Pres. Phyllis E. Rhodes 2/2/98
Signature, typed name of registered agent and fee if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Director
NAME	RHODES, ROBERT H	1.2 NAME	Rhodes, Robert H.
STREET ADDRESS	2412 BRISTOL PLACE	1.3 STREET ADDRESS	7240 Westpointe Blvd. #1127
CITY-ST-ZIP	ALPHARETTA GA 30202	1.4 CITY-ST-ZIP	Orlando, FL 32835
TITLE	D	2.1 TITLE	Director
NAME	RHODES, PHYLLIS E	2.2 NAME	Rhodes, Phyllis E.
STREET ADDRESS	2412 BRISTOL PLACE	2.3 STREET ADDRESS	7240 Westpointe Blvd #1127
CITY-ST-ZIP	ALPHARETTA GA 30202	2.4 CITY-ST-ZIP	Orlando, FL 32835
TITLE	President	3.1 TITLE	President
NAME	Rhodes,	3.2 NAME	Rhodes, Phyllis E.
STREET ADDRESS		3.3 STREET ADDRESS	7240 Westpointe Blvd. #1127
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Orlando, FL 32835
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE: Phyllis E. Rhodes Pres. 2/2/98 407-659-0055

CR2E034 (10/97)