

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

FILED
Apr 14 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 # P97000043203 (3)

1. Corporation Name

PERSONNEL BEST, INC.

Principal Place of Business

1549 RINGLING BLVD., SUITE 602
SARASOTA FL 34236

Mailing Address

1549 RINGLING BLVD., SUITE 602
SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/12/1997

4. FEI Number

65-0453143

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

MUSCO, STEPHEN M
1549 RINGLING BLVD., SUITE 602
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signatures required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME HAMMOND, JOSEPH
STREET ADDRESS 4514 SUMMER COVEDR., #111
CITY-ST-ZIP SARASOTA FL 34243

TITLE D ☐ DELETE
NAME HARTFORD, PAUL W
STREET ADDRESS P.O. BOX 2577
CITY-ST-ZIP BRANDON FL 33509

TITLE D ☐ DELETE
NAME MUSCO, STEPHEN M
STREET ADDRESS 1549 RINGLING BLVD., SUITE 602
CITY-ST-ZIP SARASOTA FL 34236

TITLE D ☐ DELETE
NAME RITTENHOUSE, TASHA
STREET ADDRESS P.O. BOX 2577
CITY-ST-ZIP BRANDON FL 32509

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Hammond, Joseph ☒ Change ☐ Addition
1.2 NAME 6102 Glen Abby Lane
1.3 STREET ADDRESS Bradenton, FL 34202 Director
1.4 CITY-ST-ZIP

2.1 TITLE Hartford, Paul W. ☒ Change ☐ Addition
2.2 NAME 4232 53rd Ave W. #2507
2.3 STREET ADDRESS Bradenton FL 34210 Director
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS Director
3.4 CITY-ST-ZIP

4.1 TITLE Rittenhouse, Tasha ☒ Change ☐ Addition
4.2 NAME 4232 53rd Ave W #2507
4.3 STREET ADDRESS Bradenton FL 34210 Director
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/28/98

Daytime Phone #

(407) 599-0000

CR2E034 (10/97)