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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000057557 (5) DOCUMENT #

ACCURATE PLACEMENT AGENCY, INC.

FILED Feb 04 1998 8:00am Secretary of State



D. C. C. LDI.	(0)															
Principal Place of Business 3450 NORTHLAKE BLVD. N PALM BEACH FL 33408 March A Mailing Address 3450 NORTHLAKE BLVD. N PALM BEACH FL 33408 1896 Palm Bchlokes Blud 2. Principal Place of Business 2a. Mailing Address											DO NOT WRITE IN THIS SPACE.					
March! 1876 Face Delle Blue													 Date Incorporated or Qualifie 07/01/1997 	d		
												4.	. FEI Number 65 - 0765180]	F	Applied For
21 1896 Palm Black lakes Bluz 26 1896 Palm Blacks Blud Sulle, Apt. #, etc. Sulle, Apt. #, etc.																Not Applicable Additional
27												5.	. Certificate of Status Desired			Required
City & State	28 4	to the termination of	in Ba	Beach, FL				6.	Election Campaign Financing Trust Fund Contribution	' <u> </u>	•	May Be Ito Fees				
Zip 3340	n .	Coun	•		_	ιþ		30	Country レル	y SZ	2	8.	 This corporation owes or has Personal Property Tax due Ju 	•	- '	ntangible
24 -010			ess of Curr		29 gister	ed Agent		30				10.	Name and Address of New		 	LJ NO
C/	ARPENTER, S				T				81	N	lame	-171	<u> </u>		-	· · · · · · · · · · · · · · · · ·
3450 NORTHLAKE BLVD.										S	treet Addre	ess (F	P.O. Box Number is Not Accep	table)		
N PALM BEACH FL 33408										+						
										C	City			F	85 Zip	Code
11. Pursuant	to the provision	ctions 607.0	502 an	oratio	on submits this statement for th	e purpose	of changing	its registered								
office or r agent. I a	rogistered ager am f amilj ar with	nt, or b o , an d a c	th, in the Sta cept the obl	ite of f ligation	lorida is of, S	Such cha Bection <mark>6</mark> 07	nge was a 7.0505, Flo	uthor orida	rized b Statute	y thi is.	e corporatio	on's t	board of directors. I hereby ac	cept the ap	npointment a	is registered
SIGNATURE Sharow A. Carpentus Statement, by ed or printed here of repotent fugent and title trapposable (NOTE Registered Agent signature required with												d wher	en teinslating)	//E	1/98	
12.			OFFICERS A					_	13.				ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTO	RS IN 12
TITLE	D						ELETE	1	.1 TITLE						Change	Addition
NAME	CARPENT 3450; NO			_					.2 NAME							
STREET ADDRESS	N PANA	BEACH	M 33408						1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		ŀ					
CITY-ST-ZIP TITLE	10,000		1				DELETE		.4 GHZ -: P.1 THLE	21-11	<u> </u>	· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition
NAME	Sharen	carp	entu	, ,	o Blud			2	2.2 NAME							
STREET ADDRESS	1896	Paln	1 lah	Lari				2	2.3 STREET ADDRESS							
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TITLE						11	DELETE		I TITLE						Change	☐ Addition
NAME Street address				3.2 NAME 3.3 STREET ADDRESS			IRESS									
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THLE	DITETE 4.1														Change	Addition
NAME			4. 2 N			1. 2 NAME										
STREET ADDRESS									.3 STREE							
CITY-ST-7IP	ļ <u>.</u>						DELETE		.4 CITY - :	S1 - 71	P				Change	Addition
NAME						F 1			.2 NAMI							
STREET ADDRESS									3 STREE	T ADO	PRESS					
CITY-ST-ZIP								5	4 CITY-	ST-21	P					
TITLÉ							DELETE	- 1	i.1 TITLE						Change	Addition
NAME								- 6	2 NAME							
STREET ADDRESS									3 STREE							
14. I hereby	certify that the	informat	on supplied	l with th	ns film	g does no	t qualify fo		exemi			Section	on 119.07(3)(i), Florida Statute	s. further	certify that th	e information

officer or director of the corporation or the receiver or trustee amnual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am at 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 Sharon

561 694-0307