

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 19, 1999 8:00 am
Secretary of State

02-19-1999 90087 012 ***150.00

DOCUMENT # P97000065629

1. Corporation Name
NATIONAL PAYROLL SERVICES, INC.

Principal Place of Business
7700 NW 37TH AVE
MIAMI FL 33147

Mailing Address
7700 NW 37TH AVE
MIAMI FL 33147



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1997

4. FEI Number

65-0773019

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 the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROGATINSKY, SAMUEL S ESQ
7700 NW 37TH AVE
MIAMI FL 33147

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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
DP	ROGATINSKY, BENJAMIN	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
7700 NW 37TH AVE			
MIAMI FL 33147			
<input type="checkbox"/> DELETE			
TITLE	NAME	2.1 TITLE	2.2 NAME
STREET ADDRESS		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CITY-ST-ZIP			
<input type="checkbox"/> DELETE			
TITLE	NAME	3.1 TITLE	3.2 NAME
STREET ADDRESS		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CITY-ST-ZIP			
<input type="checkbox"/> DELETE			
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CITY-ST-ZIP			
<input type="checkbox"/> DELETE			
TITLE	NAME	5.1 TITLE	5.2 NAME
STREET ADDRESS		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CITY-ST-ZIP			
<input type="checkbox"/> DELETE			
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CITY-ST-ZIP			
<input type="checkbox"/> DELETE			
TITLE	NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
STREET ADDRESS			
CITY-ST-ZIP			
<input type="checkbox"/> DELETE			

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, with all other like empowered.

SIGNATURE:

Benjamin Rogatinsky 2/18/99 (305) 691-2800
Date Daytime Phone #

CR2E034 (11/98)