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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000091632 (4)

FILED Mar 05 1998 8:00am Secretary of State

1. Corporation 5 STAF	R SERVICE SYSTEMS, INC.	J091002 (4)				
Principal Plac	e of Business	Maiting Address			- I AERIAERI NIN IDNIA INDAN MANIN MANIN MANIN RAKIN	IDIDI IIBIB BIIBB IIIIB IIBI IDBI
13585 BARBERRY DRIVE 13585 BARBERRY DRIVE WEST PALM BEACH FL 33414-8518					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 10/23/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 FT. MYERS 28 POBOX			1088		65-0790104	Not Applicable
Suite, Apt. 22 P 0	BOX 1088	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State City & State 23 FT MYERS FL 28 FT MYER			=	L	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33 9			Country 30	EE	This corporation owes or has paid the operation of the Personal Property Tax due June 30.	Yes XNo
	9. Name and Address of Curren	Registered Agent	81	Name	10. Name and Address of New Registere	d Agent
ANTWINE, PHYLLIS J 13585 BARBERRY DRIVE WEST PALM BEACH FL 33414-8518				Name		
				Street Addre	ess (P.O. Box Number is Not Acceptable)	
WEST FALM DEACH PL 33414-0310			83	83		
				City	F	
11, Pursuant office or r agent I a	to the provisions of Sections 607.0503 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was a tions of, Section 607.0505, Flo	es, the above-ruthorized by the	named corpo ne corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE						
	Signature, typed or printed name of registered ager		: Registered Agent	signature require		
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	ANTWINE, PHYLLIS J		1.2 NAME			Citalige C Addition (
STREET ADDRESS	AREA DAODEDOV DONE		1.3 STREET ADDRESS			
CITY-ST-ZIP	WEST DAILS SCACUE COASS OF S		1.4 CITY-ST-ZIP			
TITLE	DELETE		2.1 TITLE			Change Addition
NAME	_		22 NAME			
STREET ADDRESS	DDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP	- ZIP		2. 4 CITY - ST - ZIP			
TITLE	☐ DELETÉ		3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
\$TREET ADDRESS			3.3 STREET AD	Dress		
CITY-ST-ZIP	The contract of the contract o		3.4. CITY - ST - ZIP			Observe Addition
TITLE	□ DELETE		4.1 TITLE			Change Addition
NAME OTOGET ADDRESS			4. 2 NAME	nnson		
STREET ADDRESS	1		4.3 STREET AD			
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY - ST - 7 5.1 TITLE	er		Change Addition
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREET AD	DRESS		
CITY-ST-ZIP			5.4 City-St-2			
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET AD	DRESS		
CITY-ST-ZIP			6.4 CITY-ST-2	(P		

14. Thereby 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 13 if changed, or on an attachment with an address.

CIONATURE, NUMBER

BATTWIALE

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