

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  
Apr 09, 1999 8:00 am  
Secretary of State

04-09-1999 90065 032 \*\*\*150.00

DOCUMENT # P98000054383

1. Corporation Name  
WORKPLACE TRENDS, INC.

Principal Place of Business

3001 N. ROCKY POINT DRIVE  
EAST SUITE 200  
TAMPA FL 33607

Mailing Address

3001 N. ROCKY POINT DRIVE  
EAST SUITE 200  
TAMPA FL 33607

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/17/1998

4. FEI Number

59-3517002

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

9. Name and Address of Current Registered Agent

SHEEHAN, ROBERT  
3001 N. ROCKY POINT DRIVE  
EAST SUITE 200  
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name

SHEEHAN, ROBERT

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

12088 ANDERSON ROAD

83

SUITE 184

84 City

TAMPA

FL

85 Zip Code

33625

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

Robert J. Sheehan

4-4-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HARMON, REBECCA LYNNE

STREET ADDRESS 3001 N. ROCKY POINT DR., EAST SUITE 200

CITY-ST-ZIP TAMPA FL 33607

TITLE D ☐ DELETE

NAME SHEEHAN, ROBERT JOHN

STREET ADDRESS 3001 N. ROCKY POINT DR., EAST SUITE 200

CITY-ST-ZIP TAMPA FL 33607

TITLE D ☐ DELETE

NAME HARMON, RAYMOND WILSON JR.

STREET ADDRESS 3001 N. ROCKY POINT DR., EAST SUITE 200

CITY-ST-ZIP TAMPA FL 33607

TITLE D ☐ DELETE

NAME SHEEHAN, KATHLEEN MARY

STREET ADDRESS 3001 N. ROCKY POINT DR., EAST SUITE 200

CITY-ST-ZIP TAMPA FL 33607

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 12088 ANDERSON Rd. Suite 184

1.4 CITY-ST-ZIP TAMPA, FLORIDA 33625

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

- SAME -

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

- SAME -

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

- SAME -

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, with all other like empowered.

SIGNATURE:

Robert J. Sheehan

4-4-99

813-264-1826

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)