


FILED
May 05, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000065593			
1. Corporation Name PROED WORKFORCE, INC.			
Principal Place of Business 105 47TH AVE DRIVE W. SUITE 175 BRADENTON FL 34207		Mailing Address 105 47TH AVE DRIVE W. SUITE 175 BRADENTON FL 34207 P.O. BOX 1911 BRADENTON, FL 34206	
2. Principal Place of Business 21 318 Old Main St. Suite, Apt. #, etc. 22 SUITE 23 City & State 23 BRADENTON Zip 24 FL		2a. Mailing Address 25 P.O. BOX 1911 Suite, Apt. #, etc. 27 City & State 28 BRADENTON Zip 29 FL	
3. Date Incorporated or Qualified 07/27/1998		4. FEI Number 59-3524774	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required.		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent CHANDLER, SUSAN 105 47TH AVE DRIVE W. SUITE 175 BRADENTON FL 34207		10. Name and Address of New Registered Agent 81 Name SUSAN CHANDLER <i>NO CHANGE</i> 82 Street Address (P.O. Box Number is Not Acceptable) 83 105 47th Ave Dr W, Suite 175 84 City BRADENTON FL 85 Zip Code 34207	
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 <i>Susan Chandler</i> (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHANDLER, SUSAN 105 47TH AVE DRIVE W. SUITE 175 BRADENTON FL 34207	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PRESIDENT SUSAN CHANDLER BRADENTON, FL 342 <i>NO CHANGE</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 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)(l), 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: *Susan Chandler*

April 29, 1999 *941-739-5257*
 Date Daytime Phone

CR2E034 (1/98)