

AMENDED  
2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000071195

1. Entity Name

MORGAN STAFFING & RESEARCH GROUP, INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 OCT 25 AM 8:32

Principal Place of Business  
7850 N.W. 146TH ST.  
SUITE 504  
MIAMI LAKES, FL 33016

Mailing Address  
7850 N.W. 146TH ST.  
SUITE 504  
MIAMI LAKES, FL 33016

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0856865

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NIKKITEAN W. BAILEY  
7850 N.W. 146TH STREET  
SUITE 504  
MIAMI LAKES, FL 33016

Name  
ROBERT E. WINGER, SR.

Street Address (P.O. Box Number is Not Acceptable)  
7850 N.W. 146TH STREET  
SUITE 504

City MIAMI LAKES, FL Zip Code 33016

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE ROBERT E. WINGER, SR. PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Robert E. Winger 10/6/00

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT (P) ☐ Delete  
NAME ROBERT E. WINGER, SR.  
STREET ADDRESS 18330 MEDITERRANEAN BLVD. # 2307  
CITY-ST-ZIP MIAMI, FL 33015

TITLE (V, T) ☒ Delete  
NAME NIKKITEAN W. BAILEY  
STREET ADDRESS 18330 MEDITERRANEAN BLVD. # 2307  
CITY-ST-ZIP MIAMI, FL 33015

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P, V, T ☒ Change ☐ Addition  
NAME ROBERT E. WINGER, SR.  
STREET ADDRESS 7850 N.W. 146TH ST., SUITE 504  
CITY-ST-ZIP MIAMI LAKES, FL 33016

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert E. Winger PRESIDENT

Date

10/6/00

Daytime Phone #

305-557-7644

CR2E034 (5/00)