

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000001321

1. Entity Name

PERSONAL RESOURCE SERVICES INC.

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90054 014 ***150.00

Principal Place of Business

Mailing Address

6911 SW 17 STREET
POMPANO BEACH FL 33068

6911 SW 17 STREET
POMPANO BEACH FL 33068-4319

2. Principal Place of Business

7328 W. ATLANTIC BLVD

3. Mailing Address

7328 W. ATLANTIC BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#335

#335

City & State

MARGATE, FL

City & State

MARGATE, FL

Zip

33063

Country

BROWARD

Zip

33063

Country

BROWARD

4. FEI Number

65-0885340

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAYES, NANCY
6911 SW 17 STREET
POMPANO BEACH FL 33068

7. Name and Address of New Registered Agent

Name

NANCY SOLOMON

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

7328 W. ATLANTIC BLVD #335

City

MARGATE, FL

FL

Zip Code

33063

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

Nancy Solomon NANCY SOLOMON

03-29-00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS HAYES, NANCY
CITY-ST-ZIP 6911 SW 17 STREET
POMPANO BEACH FL 33068

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS NANCY SOLOMON
CITY-ST-ZIP 7328 W. ATLANTIC BLVD #335
MARGATE, FL 33063

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

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

TITLE ☐ Change ☐ Addition
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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:

Nancy Solomon NANCY SOLOMON

03-29-00

Date

954 401-8483

Daytime Phone #

CR2E034 (9/99)