

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000029797

1. Entity Name

DISTINCTIVE STAFFING HOME SERVICES, INC.

FILED

Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90012 027 ***550.00

A0067246

Principal Place of Business

Mailing Address

1860 RICHARD LANE
WEST PALM BEACH FL 33406

1860 RICHARD LANE
WEST PALM BEACH FL 33406-6531

2. Principal Place of Business

205 Worth Ave.

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE. 201

City & State
Palm Beach FLA.

City & State

4. FEI Number

65-0912627

Applied For

Not Applicable

Zip

Country

Zip

Country

33480 Palm Beach

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JAMES, KEITH A
5725 CORPORATE WAY, STE. 106
WEST PALM BEACH FL 33407

Name
BRENDA CONNER

Street Address (P.O. Box Number is Not Acceptable)
1860 RICHARD LANE

West Palm B.

City

FL

Zip Code

33406

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: *Brenda Conner, President*

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan. 24, 2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MORGENSTERN-CONNER, BRENDA
1860 RICHARD LANE
WEST PALM BEACH FL 33406 ☐ Delete

TITLE
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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:

Brenda Conner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 24, 2000

561-822-9977

C-1 014 (9/99)