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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

AM Israt Staff

## FILED Jun 07, 2000 8:00 am Secretary of State

06-07-2000 90004 031 \*\*\*150.00

899499 Mailing Address Principal Place of Business DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 2. Principal Place of Business FEI Number Applied For Not Applicable \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes the current year Intangible Zip Broward ☐ Yes Personal Property Tax. 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent JUANITO HENNINGEN 9034 STATE ROAD 84 Street Address (P.O. Box Number is Not Acceptable) Commerci 83 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, any accept the obligations of Section 607.0505, Florida Statutes. 1231 DENT SIGNATURE A ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE 1.1 TITLE TITLE 1.2 NAME NAME 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY+ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 32 NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4,4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE Change 51 DD F TITLE 5.2 NAME NAME -5.3 STREET ADDRESS STREET ADDRESS 5,4 CITY-ST-ZIP CITY+ST-ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

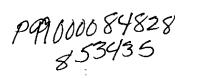
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall 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 charged or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CF2E034 (17/1)



of Corporations	Corporate Inquiry Menu: Please select an inquiry type from the list below, then enter a search key in the search field. Press SEARCH to begin the search.
Inquiry by:	4/28/00 CORPORATE DETAIL RECORD SCREEN
Corporation / Trademark	NUM: P99000084828 ST:FL ACTIVE/FL PROFIT FLD: 09/24/1999 NAME : AAA GREAT STAFF, INC.
0.00	PRINCIPAL: 9034 STATE ROAD 84
Agent Name	ADDRESS DAVIE, FL 33324 RA NAME : HENNINGER, JUANITA
Registered Agent Name	RA ADDR : 9034 STATE ROAD 84
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