

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**May 16 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF REVENUE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S27129 (3)
1. Corporation Name
SOUTH FLORIDA EMPLOYMENT CORPORATION



Principal Place of Business: **23123 SOUTH STATE ROAD 7 SUITE 255 BOCA RATON FL 33428**
Mailing Address: **23123 SOUTH STATE ROAD 7 SUITE 255 BOCA RATON FL 33428-5407**

3. Date Incorporated or Qualified: **01/24/1991**
3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business: **SUITE 301**
2a. Mailing Address: **SUITE 301**
21. Suite, Apt. #, etc.: **SUITE 301**
22. City & State: **SUITE 301**
23. City & State: **SUITE 301**
24. Zip: **SUITE 301**
25. Country: **SUITE 301**
26. Suite, Apt. #, etc.: **SUITE 301**
27. City & State: **SUITE 301**
28. City & State: **SUITE 301**
29. Zip: **SUITE 301**
30. Country: **SUITE 301**

4. FEI Number: **43-1568610**
Applied For: Applied For Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name: **JAMES N GORDON**
82 Street Address (P.O. Box Number is Not Acceptable): **23123 S STATE RD 7**
83 City: **FL 33428**
84 City: **BOCA RATON FL**
85 Zip Code: **33428**

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 and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	GORDON, JAMES	
STREET ADDRESS	23123 S STATE RD 7	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SCHALLER, VERN	
STREET ADDRESS	23123 S STATE RD 7	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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, as changed, or on an attachment with an address.

CR2E034 (9/96)