

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S49468 (9)

1. Corporation Name

MANAGEMENT RECRUITERS OF BOCA RATON, INC.



Principal Place of Business

Mailing Address

900 N. FEDERAL HWY.  
SUITE 300  
BOCA RATON FL 33432

900 N. FEDERAL HWY.  
SUITE 300  
BOCA RATON FL 33432

3. Date Incorporated or Qualified  
04/30/1991

3a. Date of Last Report  
06/16/1995

2. Principal Place of Business  
21 370 W. CAMINO GARDENS

2a. Mailing Address  
26 370 W. CAMINO GARDENS

4. FEI Number  
65-0262525

Applied For  
Not Applicable

Suite, Apt. #, etc.  
22 # 200

Suite, Apt. #, etc.  
27 # 200

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

City & State  
23 Boca Raton FL

City & State  
28 Boca Raton FL

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

Zip  
24 33432

Country  
25 Palm Bch

Zip  
29 33432

Country  
30 Palm Bch

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LABADIE, ERNEST B  
900 NORTH FEDERAL HWY.  
SUITE 300  
BOCA RATON FL 33432

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature is for principal place of business and mailing address.

(NOTE: Registered Agent signature required when re-registering)

DATE:

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME P  
STREET ADDRESS LABADIE, ERNEST B  
CITY-ST-ZIP 900 N. FED. HWY., #300  
BOCA RATON FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone #

7/3/96 (561) 343-3991

CR2E034 (3/96)