FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 28 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V09728 (9)

1. Corporation Name
SELECT PERSONNEL SERVICES, INC.

Principal Place of Business	Mailing Address
1225 US HWY 1 #220 JUNO BEACH FL 33408 US	1225 U.S. HWY 1 #220 JUNO BEACH FL 33408 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/27/1992
3a. Date of Last Report: 03/16/1994

2. Principal Place of Business	2a. Mailing Address
21 13205 U.S. Hwy One	26 13205 U.S. Hwy One
Suite, Apt. #, etc. 22 ~~#37~~ #530	Suite, Apt. #, etc. 27 ~~#37~~ #530
City & State 23 Juno Beach, FL	City & State 28 Juno Beach, FL
Zip / Country 24 33408 / 25	Zip / Country 29 33408 / 30

4. FEI Number: 65-0315929 ☐ 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

BIGING, SHAWN I.
1225 US HWY 1
STE. 220
JUNO BEACH FL 33408

10. Name and Address of New Registered Agent

81 Name: Shawn Bising
82 Street Address (P.O. Box Number is Not Acceptable): 13205 U.S. Hwy 1
83 Suite ~~#37~~ #530
84 City: Juno Beach FL 85 Zip Code: 33408

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

SIGNATURE X [signature] 4/25/95
Signature, typed or printed name of registered agent and date due — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	BISING, SHAWN I.	12 NAME	
STREET ADDRESS	1225 U.S. HWY 1, STE. 220	13 STREET ADDRESS	13205 U.S. HWY One, ~~#37~~ #530
CITY ST ZIP	JUNO BEACH FL	14 CITY ST ZIP	Juno Beach, FL 33408
TITLE	D	21 TITLE	☒ Change ☐ Addition
NAME	BISING, GUY C.	22 NAME	
STREET ADDRESS	1225 U.S. HWY 1, STE. 220	23 STREET ADDRESS	13205 U.S. Hwy One, ~~#37~~ #530
CITY ST ZIP	JUNO BEACH FL	24 CITY ST ZIP	Juno Beach, FL 33408
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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)(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 above, or on an attachment with an address.

SIGNATURE: X [signature] 4/25/95
SIGNATURE AND TYPED OR PRINTED NAME OF BINDING OFFICER OR DIRECTOR — Date — Daytime Phone #

0248090 CF