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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V09728

(9)

Mailing Address

SELECT PERSONNEL SERVICES, INC.

FILED
May 07 1997 8:00am
Secretary of State

EBER INADA KAN	<u> </u>

JUNO BEACH I US	FL 33408	US	H FL 33408-22	42		Date Incorporated or Qualified     01/27/1992	3a. Date of Last R 05/01/1996	eport
·	lace of Business	2a. Mailing A	Address			4, FEI Number 65-0315929	<del>   </del>	plied For
Suite, Apt i	#, etc	Suite, Ap	ot. #, etc.		····	Certificate of Status Desired	\$8.75	
22 City & State	<u></u>	27 City & St	oto			5 First Commission	Fee Re	<u></u>
23	,	28	iaic			6. Election Campaign Financing Trust Fund Contribution	\$5.00 • Added	May Be to Fees
Zip	Country	Zip		Count	ry	8. This corporation has liability to		
24	25	29		30		1	Yes No	
	9. Name and Address of Cur	rrent Registered Age	ent			10. Name and Address of New R	legistered Agent	
	NG, SHAWN I			8	1 Name	,		
	05 U.S. HWY 1			8	2 Street A	ddress (P.O. Box Number is Not Accepta	able)	
	TE 530 IO BEACH FL 33408			l <sub>e</sub>	3			
3014	וט מבאטח רב סטייטס			ا ا				
				8	4 City		FL 85 Zip	Code
office or re agent it ar SIGNATURE	to the provisions of Sections 607.1 egistered agent, or both, in the Similar with, and accept the ob-	0502 and 607.1508, thate of Florida. Such obligations of, Section	riorida Statute change was a 607.0505, Flo	es, the abo juthorized vrida Statut	by the corpo es.	orporation submits this statement for the oration's board of directors. I hereby according to the control of t	purpose or changing in ept the appointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registeres	d agent and title if applicable	INOTE	Registered A	gent signature re	equired when reinstating)	DATE	
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFF		
TOLE	D CHAMALL	Ļ	DELETE	1.1 TITLI			Change	Addition
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I. 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 13.1 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4(28 197 (561)626.9637