## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	Carrier	DIVISION						
DOCU 1. Corporati	IMENT #	V3194	16 (9	)					
ELITE	PERSONNEL	. & ASSOC., I	NC.			# 1880 BUISER NURS HAND BRISE	1/ <b>0</b> (0 0)(4 3)(6/2 0	iān āran sis	il Gidii Ardri (Ma)
Principal Plac	ee of Business		Mailing Address	<del></del>					
•			-						
10250 S.W D-102			10250 S.W. 56TH D-102	STREET					
MIAMI FL US	33103		MIAMI FL 33165 US			3. Date Incorporated or Qualifier		e of Last F	•
Principal I	Place of Business		2a. Mailing Address			04/28/1992 4. FEI Number		04/28/19	Applied For
]			26			65-0327991		—	Not Applicable
Suite, Apt	. #, etc.		Suite, Apt. #, etc		· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired			5 Additional
			27					Fe€	Required
City & Sta	te		City & State			<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>			May Be
Zip		Country	Zip	Cou	ntry	This corporation has liability for			199 032
il	25		29	30			es ∐No	on Gridor 5	100.002,
	9. Name and	Address of Currer	nt Registered Agent			10. Name and Address of New	/ Registered	Agent	
					81 Name				
	NCO, ELAINE				82 Street Add	ress (P.O. Box Number is Not Accept	able)		· · · · · · · · · · · · · · · · · · ·
	SW 42ND TER				83				
MIAMI	FL 33185				63				
									p Code
					B4 City		C1	85 2	p codo
11. Pursuant	to the provisions o	Sections 607.0502	2 and 607,1508, Florida St	atutes, the above	ve-named corpo	ration submits this statement for the c	FL	- I I	on observed affic
or regist	red agent, or both,	in the State of Figh	ida. Such change was auth	iorized by the c	ve-named corpo	ration submits this statement for the pard of directors. I hereby accept the ap	v roose of ob	- I I	on observed affic
familiar v	red agent, or both,	in the State of Figh	2 and 607.1508, Florida St da. Such change was auth tion 607.0505, Florida Stati	iorized by the c	ve-named corpo	ration submits this statement for the pard of directors. I hereby accept the ap	v roose of ob	- I I	
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certify that the information indigence on this arrival report or supplemental arrival 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 changed, or on an attachment with an address.

SIGNATURE: SIGNATURE SIGNATURE SIGNATURE SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR