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, PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V58119

(1)

WORKFORCE SYSTEMS CORP.

FILED Aug 28 1997 8:00am Secretary of State



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Principal Place of Business Mailing Address						ı indir millər ölimi idiği libbi içben ibri giğir ginir bibir öldir biğir iddi					
-369 CUSICK ROAD											
+ SUITE O &-		SUITE 02-									
ALCOA TN 97	Al-s	-ALCOA TN 97701-0127-			-	3. Date Incorporated or Qualified	3a Dat	o ol Lae	t Report	٦	
						08/17/1992	08/30/1996				
2. Principal P	lace of Business	2a. Mailing Address		Λ (<u> </u>	4. FEI Number			Applied For	-	
31 1JJJ	GANES ROAD	30 ULUU G	10965	s lic	ען	65-0353816		 	Not Applicable	;	
Suite Apt.	#, etc.	Suite, Ant. #, etc.	· ·				1		5 Additional	7	
22 Jujel 211		27 Suite 2	,	1				Required	1		
City & State		City & State				Election Campaign Financing \$5.00 M			00 May Be	٦	
23 boog katon th		28 BUCA KATUN		3 1 0		Trust Fund Contribution	Added to Fees				
^Z Ø 2(1.3	and Sountry Roll	マッペー マックス マンス マンス マンス マンス マンス マンス マンス マンス マンス マン	DU	itry 2	L	8. This corporation has liability for i		ax unde	rs. 199.032,		
24 3343	9. Name and Address of Current		30 10	m be	<u> </u>	Florida Statutes L		No		-	
· ·		registered Agent		B1 Name		10. Name and Address of New Re	gistered A	geni		-	
	AS PEARLMAN & TROP PA		Ł	Tvaric							
	EAST LAS OLAS			B2 Street	Addres	s (P.O. Box Number is Not Acceptab	le)			7	
	te 1900 Rt Lauderdale FL 33301		ŀ	B3						+	
FUR	RI DAUDERDALE FL 33301										
				84 City			FL	85 Zi	ip Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607 1508, Florida Statu	ites, the ab	ove-named	corpora	ation submits this statement for the p		changine	a its registeren	4	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	Florida, Such change was	authorized	by the corp	poration	's board of directors. I hereby accep	of the appo	intment	as registered	1	
ļ	m rammar with, and accept the obligati	ons bi, beenon oor cooo, r	ioniba otati	itos							
SIGNATURE	Signature, typed or printed name of registered agent	and little if applicable (NC	III Registered	Agent signature	e required s	when reinstating)	DATE				
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC] <u> </u>	
TITLE	DP	☐ DELFTE	1.1 TiT	F	DV	C1012	l	Chang	e 🔲 Addition	٥	
NAME	CHESNUTT, ELLA		1.2 NA			0 00 10 0 500 000	1000	٠.	اسم مان	3	
STREET ADDRESS	200 OUSIOK RD., SUITE C-2		1.3 STF	EET ADORESS	35	O Cedar Springs	CHIK	- 3	HAT 2	۱ğ	
CITY-ST-ZIP	ALCVA TN 87701~	Decier		Y-ST-7IP	MY	epte ut alluk		- Maria		Ήþ	
TITLE	DVS	☐ DELETE	2.1 111				ı	Chang	e 🔲 Addition		
NAME	DORROUGH, JAYME		2 2 NA		100	10 Coubi Springs 1	MAD.	4.00	، سے سا		
STREET ADDRESS	209 CUSICK RD., SUITE 0-2		1	EFT ADDRESS	2	outile and also	C1 (4)	JUU	W 3	1	
CITY-S1-ZIP	-ALOVA TN 37701	DELETE		Y-S1-ZIP	Dil	owille the 349	<i>3</i> 3	Chang	e Addition	4	
TITLE		וון טוננונ	3.1 T(T		W.	Some Houseward	l	unang	e Fa Woolde		
NAME Street Address			3.2 NAI	AE EET ADDRESS	RX	XYT HOUSMAN	Suite	211			
··· ·			1		A.	of Charles Cons	2/12				
CITY-ST-ZIP TITLE		DECETE	4.1 T(I)	Y-ST-7IP F	יענ	M DAINIA LC 2	7424	Chang	e Addition	\dashv	
NAME			4. 2 NA		-		,				
STREET ADDRESS				REET ADDRESS							
CITY-ST-ZIP				Y-ST-ZIP							
TITLE		DELETE	5.1 TIT		 			Chang	e Addition	-	
NAME			52 NA						0.0		
STREET ADDRESS				EFT ADDRESS	1				VE J		
CITY-ST-ZIP				Y-S1-ZIP					18.00		
TITLE		DELETE	6.1 7/1		1			Chang	e 🔲 Addition	1	
NAME			6.2 NAI			80000228	060	18			
STREET ADDRESS				ETT ADDRESS		80000228 -08/29/970100)40Ö	1			
CITY-ST-ZIP			1	Y-\$1-ZIP		***2793.75					

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 eath; 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.

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