

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B95000000105

1. Entity Name

HSR PARTNERS, LIMITED PARTNERSHIP

Principal Place of Business

3040 POST OAK BLVD., SUITE 310
HOUSTON TX 77056

Mailing Address

101 SUN AVE., NE
LEGAL DEPT.
ALBUQUERQUE NM 87109-4373

FILED

00 MAR 10 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

101 SUN AVENUE NE
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

ALBUQUERQUE, NM

City & State

Zip

Country

Zip

Country

4. FEI Number

76-0462302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$0.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$0.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # F95000001373
NAME HSR MANAGEMENT, INC.
STREET ADDRESS 3040 POST OAK BLVD., SUITE 310
CITY-ST-ZIP HOUSTON TX 77056

DOCUMENT # Amendment filed 1-19-2000
NAME Career Staff Management, Inc.
STREET ADDRESS 9440000 5906
CITY-ST-ZIP

DOCUMENT # 101 Sun Ave. NE
NAME Albuquerque, NM 87109
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

101 SUN AVENUE NE

CITY-ST-ZIP

ALBUQUERQUE, NM 87109

STREET ADDRESS

CITY-ST-ZIP

0000003178330-1

03/21/00-01100-013

****141.25 ****141.25

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Michael T. Berg

REQUIRE

Michael T. BERG

1-12-2000

(505) 821-3355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

SECRETARY

CR2E003 (9/99)