

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F02000004409

1. Entity Name
HIRETEK RESOURCES, INC.



FILED

2005 SEP 20 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
100 N. CENTRAL EXPWY., SUITE 1000
RICHARDSON, TX 75080

Mailing Address
100 N. CENTRAL EXPWY., SUITE 1000
RICHARDSON, TX 75080

2. Principal Place of Business

3. Mailing Address

1755 N. Collins

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 500

City & State

City & State

Richardson, TX

Zip

Country

Zip

75080

Country

09072005

Chg-P

CR2E034 (10/03)

4. FEI Number

75-2825703

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JEROMY BRANDT HAMBY
13621 NW 12TH STREET
SUNRISE, FL 33323

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution.

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**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE CP
NAME TAYLOR, JIMMY D
STREET ADDRESS 100 N. CENTRAL EXPWY., SUITE 1000
CITY-ST-ZIP RICHARDSON, TX 75080

☐ Delete

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CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Pres.
NAME J. Taylor
STREET ADDRESS 1755 N. Collins, #500
CITY-ST-ZIP Richardson, TX 75080

☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. Taylor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-14-05

Date

Daytime Phone