

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2006 8:00 am**  
**Secretary of State**

01-18-2006 90027 019 \*\*\*150.00

**DOCUMENT # F97000002645**

1. Entity Name  
**VARTEC SOLUTIONS, INC.**



Principal Place of Business  
**2440 MARSH LANE  
CARROLLTON, TX 75006 US**

Mailing Address  
**2440 MARSH LANE  
CARROLLTON, TX 75006 US**

00000000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052006

Chg-P

CR2E034 (11/05)

4. FEI Number

54-1836197

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

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

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 \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**S  
BIGGIO, TIMOTHY A  
2440 MARSH LANE  
CARROLLTON, TX 75006**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**TCFO  
ALZAMORA, K J  
2440 MARSH LANE  
CARROLLTON, TX 75006**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**CEO/TREASURER  
JOHN SCHISSLER  
2440 MARSH LANE  
CARROLLTON, TX 75006**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**CROC  
D'ANGELO, JOE  
2440 MARSH LANE  
CARROLLTON, TX 75006**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

**INTERIM COO  
MICHAEL E. KATZENSTEIN  
2440 MARSH LANE  
CARROLLTON, TX 75006**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**AT  
HEALA, ROBERT J  
236 E CAPITAL ST  
JACKSON, MS 39201**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PCEO  
HOFFMAN, MICHAEL G  
2440 MARSH LANE  
CARROLLTON, TX 75006**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**AS  
DRENNAN, MELISSA A  
2440 MARSH LANE  
CARROLLTON, TX 75006**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

*Tim Biggio*

**TIMOTHY A. BIGGIO**

**1/10/06**

**972-478-3339**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #