FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

08-11-2003 90290 005 ***158.75
FILED P02000050986

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000050986

1. Entity Name

Human Resource Support Network, Inc.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
123 N. Congress Ave	123 N. Congress Ave
Suite, Apt. #, etc. #385	Suite, Apt. #, etc. #385
City & State Boynton Beach, FL	City & State Boynton Beach, FL
Zip 33426 Country USA	Zip 33426 Country USA

4. FEI Number 01-0714289 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Scot Frank

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

8005 Red Reef Ln.

City Boynton Beach FL Zip Code 33436

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 Scot A. FRANK, Vice President and Secretary 8/6/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Costeel, Scott
STREET ADDRESS	740 Tradewind Dr.
CITY-ST-ZIP	North Palm Beach, FL 33408
TITLE	Vice President, Secretary
NAME	Frank, Scot
STREET ADDRESS	8005 Red Reef Ln.
CITY-ST-ZIP	Boynton Beach, FL 33436
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Scot Frank Scot Frank Vice President & Secretary 8/6/03 561 704 5290

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment #
86135744
P09000050986

8/8/03

Dear Sir or Ma'am

I'm sorry This is late. This is our FIRST year in Business and we did not know we had to File a URB. I am also asking For a Certificate so I will Know, in The Future, what The Filing Requirement Dates are. Please, waive Late fee.

Thank You,

Scott Ficell
Vice President
Human Resource Support
Network, Inc.