2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

P27014 **DOCUMENT #**

1. Entity Name



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90171 039 ***150.00

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	ERVICES RESOURCE GROU	JP, INC.					
Principal Pla 2300 WEST P PLANO TX 75 US	•	Mailing Address P.O BOX 269005 ATTN: TAX DEPT, PLANO TX 75026-9005 US					
2. Principal	Place of Business	3. Mailing Address		LEGINGE 180 110 100 001 110 010 010 010	1 XIBII BIBII BIBII BIBII 1881		
Suite, Apt	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING (CHANGES		
City & Sta	ite .	City & State		4. FEI Number 75-2011854	Applied For Not Applicable		
Zip	Country	Zip	Country		8.75 Additional ee Required		
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Ag	gent		
			Name				
	ATION SERVICE COMPANY		Street Add	Street Address (P.O. Box Number is Not Acceptable)			
	's street						
TALLAHA	SSEE FL 32301-2525		1	•			
			City	FL	Zip Code		
8. The above	e named entity submits this statement for	or the purpose of changing its re	registered office or re	egistered agent, or both, in the State of Florida. I am far	miliar with, and accept		
the obliga	ations of registered agent.						
SIGNATURE							
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature	required when reinstating) DATE			
	ILE NOW!!! FEE IS \$150.00						
	122 11011111 122 13 \$100100			O Classian Commissa Financian	ΦE 00 · · ·		
	er May 1, 2003 Fee will be \$550.00	4.04-4-		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
Make Chec	er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	<u></u>		Trust Fund Contribution.	Added to Fees		
Make Chec	er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o OFFICERS AND	DIRECTORS	11.	Trust Fund Contribution.	Added to Fees		
Make Chec 10.	er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND	<u></u>	TITLE	ADDITIONS/CHANGES TO OFFICERS AND E	Added to Fees		
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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.

Date

(972)577-0000