

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90090 039 ***550.00

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DOCUMENT # P95000056025

1. Entity Name

HUMAN CAPITAL RESOURCES, INC.



Principal Place of Business

**475 CENTRAL AVE
STE 205
ST. PETERSBURG FL 33701
US**

Mailing Address

**475 CENTRAL AVE
STE 205
ST. PETERSBURG FL 33701
US**

2. Principal Place of Business

290 9th Street North

3. Mailing Address

290 9th Street North

Suite, Apt. #, etc.

Suite 202

Suite, Apt. #, etc.

Suite 202

City & State

St. Petersburg FL

City & State

St. Petersburg, FL

Zip

33705

Country

USA

Zip

33705

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3330564

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MILLER, RANDELL
315 S HYDE PARK AVE
TAMPA FL 33606**

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. 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
After September 10, 2003 Fee will be \$750.00
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 NAME ☐ Delete
**PTD
WERLIN, PAUL A
475 CENTRAL AVENUE, SUITE 205
ST PETERSBURG FL 33701**

TITLE NAME ☐ Delete
**S
WERLIN, ELIZABETH
475 CENTRAL AVENUE, SUITE 205
SAINT PETERSBURG FL 33701**

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP
**290 9th Street North, Suite 202
St. Petersburg, Florida 33705**

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP
**290 9th Street North, Suite 202
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TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul A. Werlin 9/10/03

727-898-0212

Date

Daytime Phone #

CR2E034 (4/03)