2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001379

Entity Name: HEALTHCARE RESOURCE RECRUITERS, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2223 ST CHARLES DR 2223 ST CHARLES DR CLEARWATER, FL 34624 CLEARWATER, FL 33764

Current Mailing Address: New Mailing Address:

2223 ST CHARLES DR 2223 ST CHARLES DR CLEARWATER, FL 34624 CLEARWATER, FL 33764

FEI Number: 59-3549684 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIAPNO, CRAIG
2223 ST CHARLES DR
CLEARWATER, FL 34624
SIAPNO, CRAIG
2223 ST CHARLES DR
CLEARWATER, FL 33764

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.

SIGNATURE: 04/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SIAPNO, CRAIG
 Name:
 SIAPNO, CRAIG

 Address:
 2223 ST CHARLES DR
 Address:
 2223 ST CHARLES DR

 City-St-Zip:
 CLEARWATER, FL 34624
 City-St-Zip:
 CLEARWATER, FL 33764

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG R SIAPNO DIR 04/28/2004