

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000002187

Entity Name: HOLLMAN, INC.**Current Principal Place of Business:**1825 W WALNUT HILL LANE #110
IRVING, TX 75038**Current Mailing Address:**1825 W WALNUT HILL LANE #110
IRVING, TX 75038 US**FEI Number:** 93-0890942**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CHAIRMAN
Name	HOLLMAN, TRAVIS
Address	SUITE 110
City-State-Zip:	IRVING TX 75038

Title	PRES
Name	HOLLMAN, TRAVIS
Address	1825 W WALNUT HILL LANE #110
City-State-Zip:	IRVING TX 75038

Title	TREASURER
Name	AUTRY, PIERCE
Address	1825 W WALNUT HILL LANE #110
City-State-Zip:	IRVING TX 75038

Title	COO
Name	HWANG, SUE
Address	1825 W WALNUT HILL LANE #110
City-State-Zip:	IRVING TX 75038

Title	MANAGER/AUTHORIZED REP
Name	MORRIS, JOSIE
Address	1825 W WALNUT HILL LANE #110
City-State-Zip:	IRVING TX 75038

I hereby 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 all other like empowered.

SIGNATURE: MORRIS, JOSIE**MANAGER/AUTHORIZED REP** 04/29/2022_____
Electronic Signature of Signing Officer/Director Detail_____
Date