

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000000388

**FILED**  
**Apr 30, 2019**  
**Secretary of State**  
**7276984153CC**

**Entity Name:** STRATEGIC PROFESSIONAL RESOURCES, INC.

**Current Principal Place of Business:**

1406 FORT CROOK ROAD SOUTH STE 301  
BELLEVUE, NE 68005

**Current Mailing Address:**

1406 FORT CROOK ROAD SOUTH STE 301  
BELLEVUE, NE 68005 US

**FEI Number:** 27-0758778

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 4TH STREET N,  
SUITE 300  
ST.PETERSBURG, FL 33702 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 C,T  
Name ZINK, MARTHA  
Address 1406 FORT CROOK ROAD SOUTH STE 301  
City-State-Zip: BELLEVUE NE 68005

Title D,VP  
Name KLEVEN, ISAAC  
Address 1406 FORT CROOK ROAD SOUTH STE 301  
City-State-Zip: BELLEVUE NE 68005

Title D,S  
Name ZINK, CHRISTOPHER  
Address 1406 FORT CROOK ROAD SOUTH STE 301  
City-State-Zip: BELLEVUE NE 68005

Title P  
Name SAYLES, SKIP  
Address 1406 FORT CROOK ROAD SOUTH STE 301  
City-State-Zip: BELLEVUE NE 68005

*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:** ISAAC KLEVEN

**VICE PRESIDENT**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date