2005 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 24, 2005 08:00 AM Secretary of State DOCUMENT # F99000001303 COM-TECH RESOURCES, INC. Principal Place of Business Mailing Address 3709 WESTWAY STREET, SUITE A 3709 WESTWAY STREET, SUITE A **TYLER, TX 75703 TYLER, TX 75703** 01062005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 75-2376947 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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 11000000195300. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 01/26/05-80022-025 158.75 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PDT TITLE TIPPLE, RALPH H NAME STREET ADDRESS 3709 WESTWAY STREET, SUITE A CITY-ST-ZIP TYLER, TX 75703 TITLE TIPPLE, PHYLLIS A NAME STREET ADDRESS 3709 WESTWAY STREET, SUITE A CITY-ST-ZIP TYLER, TX 75703 SD TITLE NAME SHEW, TAMMY STREET ADDRESS 3709 WESTWAY ST SUITE A DO NOT WRITE CITY-ST-ZIP **TYLER, TX 75703** IN THIS SPACE TITLE HOEFFNER, BRAD NAME STREET ADDRESS 3709 WESTWAY ST SUITE A CITY-ST-ZIP TYLER, TX 75703 NAME 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: Maller TAPPLE UP

NAME STREET ADDRESS

1-19-05 903-509-9850

FILED