## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000004789

FILED Apr 18, 2007 Secretary of State

Entity Na	me: ACCENT	URE HR SERVICES, INC.				
Current P	rincipal Place	e of Business:	New Prin	New Principal Place of Business:		
233 N. MICHIGAN AVE., STE. 1100 CHICAGO, IL 60601				161 N. CLARK STREET CHICAGO, IL 60601		
Current M	lailing Addre	ss:	New Mail	New Mailing Address:		
233 N. MIC CHICAGO	CHIGAN AVE., , IL 60601	STE. 1100				
FEI Number	: 06-1606783	FEI Number Applied For ( )	FEI Number Not App	olicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
1201 HAYS TALLAHAS	S STREET SSEE, FL 323					
	named entity e of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered A	gent	Date		
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( HUGHES, MICI 161 N. CLARK CHICAGO, IL	STREET	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MICHELLE, AD	AN AVE., STE. 1100	Title: Name: Address: City-St-Zip:	BIZZACK, JE 2141 ROSEC	(X) Change () Addition EFFREY M CRANS AVE, SUITE 3100 O, CA 90245	
Title: Name: Address: City-St-Zip:	S ( HUGHES, MICI 161 N. CLARK CHICAGO, IL	STREET	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name:	T ( COTE. JEFFRI	) Delete EY J	Title: Name:	T AHLSTROM.	(X) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

161 N CLARK STREET

CHICAGO, IL 60601

SIGNATURE: MICHAEL HUGHES TREA 04/18/2007

233 N. MICHIGAN AVE., STE. 1100

CHICAGO, IL 60601

Address:

City-St-Zip: