# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 18, 2007**
**Secretary of State**

DOCUMENT# F06000006108

**Entity Name:** PERSONNEL POWER, INC.

**Current Principal Place of Business:**

30500 VAN DYKE SUITE 209
WARREN, MI 48093

**New Principal Place of Business:**

30500 VAN DYKE SUITE 209
WARREN, MI 48093 US

**Current Mailing Address:**

30500 VAN DYKE SUITE 209
WARREN, MI 48093

**New Mailing Address:**

30500 VAN DYKE SUITE 209
WARREN, MI 48093 US

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD SUITE 101
TALLAHASSEE, FL 323012960 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete
Name: GATES, DRAKE
Address: 30500 VAN DYKE SUITE 209
City-St-Zip: WARREN, MI 48093

Title: VPS ( ) Delete
Name: GATES, CATHERINE
Address: 30500 VAN DYKE SUITE 209
City-St-Zip: WARREN, MI 48093

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: GATES, DRAKE
Address: 30500 VAN DYKE SUITE 209
City-St-Zip: WARREN, MI 48093

Title: T (X) Change ( ) Addition
Name: GATES, DRAKE
Address: 30500 VAN DYKE SUITE 209
City-St-Zip: WARREN, MI 48093

Title: D ( ) Change (X) Addition
Name: GATES, DRAKE
Address: 30500 VAN DYKE SUITE 209
City-St-Zip: WARREN, MI 48093

Title: V ( ) Change (X) Addition
Name: GATES, CATHERINE
Address: 30500 VAN DYKE SUITE 209
City-St-Zip: WARREN, MI 48093

Title: S ( ) Change (X) Addition
Name: GATES, CATHERINE
Address: 30500 VAN DYKE SUITE 209
City-St-Zip: WARREN, MI 48093

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.

SIGNATURE: CATHERINE GATES P 04/18/2007

Electronic Signature of Signing Officer or Director — Date