

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085262

FILED
Jan 08, 2009
Secretary of State

Entity Name: HPI PROJECT MANAGERS, INC.

Current Principal Place of Business:

10754 PLANTATION BAY DRIVE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

10754 PLANTATION BAY DRIVE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 90-0044698 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIVYER, NEAL
401 E. JACKSON STREET
SUITE 2225
TAMPA, FL 33602 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: P () Delete
Name: KUSHA, AA
Address: 10754 PLANTATION BAY DR
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: KUSHA, SIAMAK
Address: 18111 REGENTS SQUARE DR.
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: KUSHA, BABAK
Address: 3105 DEER MEADOW DR.
City-St-Zip: DANVILLE, CA 94506

Title: D () Delete
Name: KUSHA, BARMAK
Address: 5832 WYNDHAM CIRCLR , # 204
City-St-Zip: COLUMBIA, MD 21044

Title: D () Delete
Name: KUSHA, MEHRANAK
Address: 10754 PLANTATION BAY DR.
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: AHMAD KUSHA

PRES

01/08/2009

Electronic Signature of Signing Officer or Director

_____ Date