

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000035965

Entity Name: HIRINGHELPER.COM, INC.

FILED  
Jan 26, 2009  
Secretary of State

## Current Principal Place of Business:

1201 SE 15TH AVE  
DEERFIELD BEACH, FL 33441

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 626  
DEERFIELD BEACH, FL 33443

## New Mailing Address:

FEI Number: 20-2491373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERT CLAYMAN, CPA  
760 US HIGHWAY ONE  
SUITE 303  
NORTH PALM BEACH, FL, FL 33408 US

## Name and Address of New Registered Agent:

ROBERT CLAYMAN, CPA  
760 US HIGHWAY ONE  
SUITE 303  
NORTH PALM BEACH, FL 33408 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:

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: BREISTOL, SUZANNE  
Address: P.O. BOX 626  
City-St-Zip: DEERFIELD BEACH, FL 33443

Title: ST/D ( ) Delete  
Name: KENT, LEIGHTON  
Address: P.O. BOX 626  
City-St-Zip: DEERFIELD BEACH, FL 33443

Title: D ( ) Delete  
Name: JOHN, BREISITOL  
Address: P.O. BOX 626  
City-St-Zip: DEERFIELD BEACH, FL 33443

## 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:

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: KENT LEIGHTON

ST/D

01/26/2009

Electronic Signature of Signing Officer or Director

Date