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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600060509 (2)

HIRE POWER GROUP, INC.

STREET ADDRESS

CITY-ST-ZIP

Principal Place of Business Mailing Address 1201 W CENTRAL BLVD PO BOX 1926 **CHANDLER AZ 85244-1926** ORLANDO FL 32805 3. Date Incorporated or Qualified 3a. Date of Last Report 07/17/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Regulred 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution \Box Added to Fees Zio Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 30 🔀 Yes 🔲 No 25 29 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WILLIAMS, SUZANNE 1201 W CENTRAL BLVD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32805 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or pented name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ICID THLE 1.1 THLE Roger J. Jusseaume NAME 1.2 NAME ilas Vegas Valley or STREET ADDRESS 1.3 STREET ADDRESS 101P8 VVV CITY-ST-ZIP 1.4 CITY - ST - ZIP Change Addition DELETE 2.1 TITLE TITLE William Yellig, Jr. Parkway NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS anton 44708 2.4 CITY - ST - ZIP CITY-ST-ZIP Change ☐ DELETE 3.1 TITLE Michael J. Schofield 3.2 NAME NAME HIHE APPATOOSA CT. STREET ADDRESS 3.3 STREET ADDRESS AZ 85296 Gilbert 3.4. CITY - ST-ZIP CITY-ST-76 DELETE TITLE 4.1 TITLE ☐ Change **Addition** ichard E Carlson NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 82333 CITY-S1-7/P 4.4 CITY - ST - ZIP DELETE 101LE 51 TITLE Change ___ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 City - St - ZiP DELETE Addition TOLE 61 TITLE 62 NAME NAME

GIGNATURE: Richard C. Carlson 2/3/97 (602)820.1234

14. I do 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

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

information indicated on this annual report or supplemental annual 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

R2E034 (9/96)

FILED

Feb 18 1997 8:00am

Secretary of State