2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P96000060509 **DOCUMENT #**

1. Entity Name

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

HIRE POWER GROUP, INC.



FILED Feb 07, 2003 8:00 am Secretary of State

02-07-2003 90098 044 ***150.00

	a							
Principal Place of Business Mailing Address 1201 W CENTRAL BLVD PO BOX 1926 ORLANDO FL 32805 CHANDLER AZ			26					
2. Principal Place of Business 3. Mailing Address						O IRANA DANA BUNA DENIA BONA	I I A I BANGA I I I	HILL BERTLE HELL HERE
Suite, Apt. #, etc. Suite, Apt. #			# etc.		4			
					☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 59-3391578 Applied For Not Applied by Applied For			Applied For Not Applicable
Zip Country		Zip Cou		ntry	5. Certificate of Status Desired S8.75 Additional Fee Required		Additional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
01875				- Name				
OLIVER, PEARLINE 1201 W CENTRAL BLVD				Street Address (P.O. Box Number is Not Acceptable)				
	O FL 32805							
				City			FL Zip C	Code
8. The above	e named entity submits this statement	for the purpose of char	naina its reaister	ed office or registe	ered agent or both i		· —	ith and accept
the obliga	tions of registered agent.		.gg 110 10 g.010	ou omoo or rogion	area again, ar bour, i	if the state of Florida.	am amma w	ui, and accept
SIGNATURE			-,					
	Signature, typed or printed name of registered age	nt and title if applicable.	(NOTE: Registere	ed Agent signature require	ed when reinstating)	O _i	ATE	7
Afte	FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department					on Campaign Financing Fund Contribution.		.00 May Be ded to Fees
10.	OFFICERS ANI	D DIRECTORS	11.		ADDITIONS/CH	ANGES TO OFFICERS	AND DIRECTO	ORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD JUSSEAVME, ROGER J 1245 W. GUADALUPE, B6-227 MESA AZ 85202	☐ Dele	NAM Stre				☐ Chang	ge 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V YELLING, WILLIAM J 2405 LARCHMOOR PARKWAY CANTON OH	☐ Dele	ete Title NAM Stre	E			☐ Chang	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHOFIELD, MICHAEL J 1414 E, APPALOOSA CT. GILBERT AZ	Dele	NAMI STRE	ET ADDRESS P.O	arch Judy Box 195	7 16 2.85244	· Chang	e 🔼 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CARLSON, RICHARD E 901 W. BARBADOS DR. GILBERT AZ	Dele	NAM! STRE				☐ Chang	e 🔲 Addition
TITLE NAME		☐ Dele	te TITLE		3-44-1		☐ Chang	e

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE: Richard Charleme O'Blichard E. Golson Treasurer 1-2803 (480)820-0123 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

Addition