	e of Rhode Island and F Office of the Secre	
ecretary of State	Division Of Busin 148 W. Rive Providence RI 0 (401) 222-	r Street 2904-2615
oreign Business Corpo nnual Report ling Period: January 1 - March		
accordance with R.I.G.L. 7-1 nnual report within thirty (30) da &d)) is subject to a penalty fee	lays after the time prescribed l	
ANNUAL REPORT YEAR: 20	14	
1. Corporate ID No. 0002	139226	
2. Name of Corporation <u>hib</u>	ou Inc.	
3. Street Address Principal B	Jusiness Office:	
	<u>XR PLAZA</u> <u>NDALE</u> State: <u>N</u>	<u>IY</u> Zip: <u>11556</u> Country: <u>USA</u>
4. Business Phone No.		
5. State of Incorporation		
State: <u>DE</u>		
6. Brief Description of the Ch	haracter of Business Condu	cted in Rhode Island
DIRECTORY ADVERTISIN		
7. Names and Addresses of t		
All officers and dimestors a	must de listed.	
All officers and directors r		
All officers and directors r Title	Individual Name First, Middle, Last, Suffix	Address Address City or Town, State, Zip Code, Country
	Individual Name First, Middle, Last, Suffix KEVIN JASPER	Address, City or Town, State, Zip Code, Country 6300 C STREET SW
Title	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CNP		\$0.0000	1,000.00	0
<b>Signed this 6 Day of Marc</b> <i>individuals signing this inst</i> <i>signatory, under penalties of</i> <i>act and deed of the corpora</i> <i>electronic filing, in complia</i> By <u>BRYAN TURNER</u> Signature of Authorized F	<b>h, 2014 at 1:27:24 P</b> trument constitutes th of perjury, that this in ution, and that the fac nce with R.I. Gen. La	ne affirmation or ackn estrument is that indiv ests stated herein are th tws § 7-1.2.	owledgement of i idual's act and d	the eed or the
<u>CFO &amp; VP</u> Title				
	cepted for filing if an	officer has executed	the form and he/s	she is not
Title This report cannot be ac	cepted for filing if an	officer has executed	the form and he/s	she is not