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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025072

1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

THE HILLIS CORPORATION

Principal Plac	e of Business		Mailing Address										
2987 BELLEVUE	E AVENUE		PO BOX 1051										
DATONA BEACH FL 32124 US			DEBARY FL 32713					_	O NOT WR	ITE IN THI	S SPACE		
			US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					1	
								15/1 996	a di Quanico				
2 Principal P	lace of Rusiness		2a. Mailing Address					Nı mber			Ac	r lied For	1
2. Principal Place of Business		<u></u>	26					59-3364729			<u> </u>	t Applicable	1
21 Suite. Apt. #, etc.			Suite, Apt. #, etc.								\$8.75		1
¬ ' '		l-	27 Suite, Apt. #, etc.				5. Certificate of Status Desired		IJ	Fee Required			
22 City & 5 tat	'e		City & State		6.6		6 Fled	6. Election Campaign Financing			\$5.00 May Be		
23	•	<u> </u>	28					at Fund Contr	-		Added	•	
Zip	Country		Zip	Count	try		8 This	corporation	owes the cur	rent year Ir	ntangible		1
24	25	⊢	29	30	-		-	sorial Property		•	☐ Yes	□No	
	9. Name and Addre			·			10. Nan	ne and Addr	ess of New	Registere	J Agent]
				8	31 1	Name							
	is, Michael					O4	(D O S	Bo) Number is	a Not Accord	able)			1
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DAY	tona Beach FL 321	24		8	33								1
				L	Ш.								
				8	34 (City				FI	85 Zip (Code	1
11. Pursuant	to the provisions of Sect	ions 607.0502 an	d 607.1508, Florida Stat	tes, the abo	ove-n	named corpo	oration sub	mits this state	ement for the	purpose o	of changing its	egistered	-
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14. I heretly certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0°(3)(i), Florida Statutes. I further certify that the 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 the my name appears in Block 12 or Block 13 if changer, or on an attachment with an address, with all other like empowered. 7000-517-6005 SIGNATURE:

6.4 CITY-ST-ZIP

Daytime Phone #