

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -3 PM 5:08

DOCUMENT # L00628 (2)

1. Corporation Name

HILLSBORO, BENTLEY AND STERN, INC.

Principal Place of Business

**2601 S. BAYSHORE DR
SUITE 600
MIAMI FL 33133
US**

Mailing Address

**2601 S. BAYSHORE DR
SUITE 600
MIAMI FL 33133
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/05/1989

3a. Date of Last Report

02/22/1994

4. FEI Number

65-0136763

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

Country

28

29

30

9. Name and Address of Current Registered Agent

~~HOLTZMAN, SYLVAN
2601 S. BAYSHORE DR
SUITE 600
MIAMI FL 33133~~

10. Name and Address of New Registered Agent

81 Name

HKES&F Registered Agent Corp.

82 Street Address (P.O. Box Number is Not Acceptable)

2601 South Bayshore Drive

83

Suite 600

84 City

Miami

FL

85

Zip Code

33133

11. Pursuant to the provisions of Sections 607.0302 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 607.0302, Florida Statutes.

SIGNATURE

Sylvan Holtzman

Signature, typed or printed name of registered agent (Section 4 applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

7/12/95

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PSD
HOLTZMAN, SYLVAN
2601 S. BAYSHORE DR., SUITE 600
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**P
GORDON, MARK
4250 NW 135TH ST.
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 registered agent or an employee of the corporation, and that my name appears in Block 12 or Block 13 if changed, or on an attachment when applicable.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Chapter 19, Section 9