

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**  
05-13-2002 90242 010 \*\*\*150.00

**DOCUMENT #** P00000113232

**1. Entity Name**  
HILCO1, INC.

**Principal Place of Business**

4100 SW 101 AVENUE  
DAVIE FL 33328

**Mailing Address**

4100 SW 101 AVENUE  
DAVIE FL 33328

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number**

65-1064214

Applied For  
Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

HILTON, RAY  
4100 SW 101 AVENUE  
DAVIE FL 33328

Name

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

City

FL

Zip Code

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.**  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing** ☐ **\$5.00 May Be  
Trust Fund Contribution. Added to Fees**

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HILTON, RAY  
4100 SW 101 AVENUE  
DAVIE FL 33328 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

**13. I 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 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 11 or Block 12 if changed, or on an attachment with an address with another like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

FROM :

FAX NO. :

Sep. 19 2001 03:02PM P2



Department of the Treasury  
Internal Revenue Service

ATLANTA, GA 39901

In reply refer to: 0716504661  
Nov. 29, 2001 LTR 429C  
65-1145900 200012 02

02720

HILCO-I-INC  
4100 SW 101 AVE  
DAVIE FL 33328-2234

Taxpayer Identification Number: 65-1145900  
Tax Period(s): Dec. 31, 2000

Form: 1120S

Dear Taxpayer:

We are processing your Form 1120S, U.S. Income Tax Return For an S Corporation, and find we need additional information. Please send the following:

We have no record of your filing Form 2553 and electing to be treated as an S corporation for income tax purposes.

If you filed Form 2553, please send us a copy of it with all shareholders' consents. If this copy does not have an Internal Revenue Service date of receipt stamp, we will need verification that your form was filed on time. Your verification can be a photocopy of the letter that told you the form was accepted.

If you did not file the Form 2553, or if your election was revoked or terminated, please complete the enclosed Form 1120 and return it. You should also advise all shareholders to amend their individual income tax returns, Form 1040, for the year involved if they reported the Form 1120S income or loss on Form 1040, or reported or claimed other expenses or credits attributable to the corporation.

We have enclosed a corporation income tax return, Form 1120, for you to file instead. Please complete and return it. You should also advise all shareholders that they may need to amend their individual income tax returns, Form 1040, for the year involved. They will need to do this if they reported the Form 1120S income or loss on Form 1040, or reported or claimed other expenses or credits attributed to the corporation.

Please provide the information requested within 30 days from the date of this letter. If we do not hear from you, your account may reflect incomplete or incorrect information. We have enclosed an envelope for your convenience.

If you wish to send the information by fax, our fax number is 770-454-1607. Please include a cover sheet containing the following

*Handwritten notes:*  
959541  
# P000001/3232  
which is correct??  
? IRS