

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91017 010 ***150.00

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1. Entity Name
HILTON IMAGES, INC.



Principal Place of Business
6770 SW 9TH STREET
PEMBROKE PINES, FL 33023

Mailing Address
6770 SW 9TH STREET
PEMBROKE PINES, FL 33023

94081542



02292004 No Chg-P CR2E034 (10/03)

4. FEI Number
01-0556711

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HILTON, RICHARD W
6770 SW 9TH STREET
PEMBROKE PINES, FL 33023

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

Richard Hilton
(NOTE: Registered Agent signature required when reinstating)

4/25/04
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HILTON, BEVERLEY
6770 SW 9TH STREET
PEMBROKE PINES, FL 33023

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
HILTON, Richard
6770 SW 9TH STREET
PEMBROKE PINES, FL 33023

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

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Hilton

4/25/04 (954) 609-8884
Date Daytime Phone #