

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000130981

Entity Name: HILLMAN CONSULTING, INC.

FILED
Apr 17, 2007
Secretary of State

Current Principal Place of Business:

1150 NW 72ND AVE
350
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

1150 NW 72ND AVE
350
MIAMI, FL 33126

New Mailing Address:

FEI Number: 56-2418899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLMAN-WALLER, LOUIS M
3006 AVIATION AVENUE
PH-4C
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: HILLMAN-WALLER, EDUARDO
Address: 1150 NW 72ND AVE., SUITE 350
City-St-Zip: MIAMI, FL 33126

Title: CHRM () Delete
Name: WOLFF, DERISH M
Address: 100 HALSTED STREET
City-St-Zip: EAST ORANGE, NJ 07018

Title: ST () Delete
Name: KORNELL, RONALD F
Address: 103 HAMMERSMITH RD.
City-St-Zip: LONDON, UK

Title: AS () Delete
Name: PEARLSON, PAUL A
Address: 100 HALSTED STREET
City-St-Zip: EAST ORANGE, NJ 07018

Title: AS () Delete
Name: PEPE, SALVATORE J
Address: 100 HALSTED STREET
City-St-Zip: EAST ORANGE, NJ 07018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: KORNELL, RONALD F
Address: 2445 M STREET NW
City-St-Zip: WASHINGTON, DC 20037 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVATORE J. PEPE

AS

04/17/2007

Electronic Signature of Signing Officer or Director

Date