

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90088 006 ***150.00

DOCUMENT # P35443

1. Corporation Name

HILTON INTERNATIONAL CO.

Principal Place of Business

Mailing Address

~~ONE WALL ST. COURT~~ 901 Ponce de Leon Blvd. ~~ONE WALL ST. COURT~~ 901 Ponce de Leon Blvd.
7TH FLOOR Suite 700 7TH FLOOR Suite 700
NEW YORK NY 10006 Coral Gables, FL NEW YORK NY 10006 Coral Gables, FL 33134
US 33134



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified

09/10/1991

4. FEI Number

13-1582113

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH STREET
SUITE 300
NORTH MIAMI BEACH FL 33162

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CEO ☐ DELETE
NAME JARVIS, DAVID
STREET ADDRESS MAPLE CT. CENTRAL PARK, REEDS CRESCENT
CITY-ST-ZIP WATFORD HE

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

TITLE SVP ☐ DELETE
NAME WALLACE, BRIAN
STREET ADDRESS MAPLE CT. CENTRAL PARK, REEDS CRESCENT
CITY-ST-ZIP WATFORD HE

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

TITLE P ☒ DELETE
NAME HANDL, R.E.
STREET ADDRESS TOKYO HILTON, 6-2 NISHI-SHINJUKU 6 CHOME
CITY-ST-ZIP SHINJUKU-KU TO

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME P
3.3 STREET ADDRESS Koos Klein
3.4 CITY-ST-ZIP Tokyo Hilton, 6-2 Nishi-Shinjuku 6 Chome
Shinjuku, Tokyo Japan

TITLE AT ☐ DELETE
NAME LIERMAN, PAUL
STREET ADDRESS 901 PONCE DE LEON BLVD, STE 700
CITY-ST-ZIP CORAL GABLES FL

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

TITLE P ☐ DELETE
NAME RECALT, MICHEL
STREET ADDRESS 901 PONCE DE LEON BLVD STE 700
CITY-ST-ZIP CORAL GABLES FL 33134

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

TITLE SVP ☐ DELETE
NAME NAHAS, AHMED E
STREET ADDRESS 1115 CORNICHE EL NIL
CITY-ST-ZIP CAIRO EG

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

14. 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 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 that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Paul Kerman

4/9/99

305-444-3444

Date

Daytime Phone #