

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:09

DOCUMENT # P93000005841 (0)

1. Corporation Name:

HILKAR CONSULTING, INC.

Principal Place of Business:

333 W. CAMINO GARDENS BLVD.
STE. 203
BOCA RATON FL 33432

Mailing Address:

333 W. CAMINO GARDENS BLVD.
STE. 203
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/21/1993

3a. Date of Last Report

03/08/1994

4. FEI Number

65-0379599

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

2. Principal Place of Business

21. 10001 W. Oakland Park Blvd.

2a. Mailing Address

26. 10001 W. Oakland Park Blvd.

Suite, Apt., etc.

22. 101

Suite, Apt., etc.

27. 101

City & State

23. Sunrise FL

City & State

28. Sunrise FL

Zip

24. 33351

Country

25. US

Zip

29. 33351

Country

30. US

9. Name and Address of Current Registered Agent

SPIEGEL, HERBERT J
333 W. CAMINO GARDENS BLVD.
STE. 203
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81. Name

SPIEGEL HERBERT J.

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

10001 W. Oakland Park Blvd Suite 101

83.

84. City

SUNRISE

FL

85. Zip Code

33351

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 of the person appointed as registered agent and the corporation

(NOTE: Registered Agent signature required after consolidation)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SPIEGEL, HERBERT J
STREET ADDRESS	7550 S.W. 42 CT.
CITY - ST - ZIP	DAVE FL 33314
TITLE	DST
NAME	LEEKES, ARTHUR F
STREET ADDRESS	12-20 CAMOMILE ST., ELLERMAN HOUSE
CITY - ST - ZIP	LONDON, ENGLAND EC3A7PJ
TITLE	D
NAME	MARSH, ROGER E
STREET ADDRESS	12-20 CAMOMILE ST., ELLERMAN HOUSE
CITY - ST - ZIP	LONDON, ENGLAND EC3A7PJ
TITLE	D
NAME	SKINNER, RONALD
STREET ADDRESS	12-20 CAMOMILE ST., ELLERMAN HOUSE
CITY - ST - ZIP	LONDON, ENGLAND EC3A7PJ
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	DP	☒ Change ☐ Addition
1.2 NAME	SPIEGEL, HERBERT J	
1.3 STREET ADDRESS	10001 W. Oakland Park Blvd Suite 101	
1.4 CITY - ST - ZIP	SUNRISE, FL 33351	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
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 is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(3)(b), Florida Statutes. I further certify that the information made part of 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.

SIGNATURE:

Prof. Herbert J. Spiegel
SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERED AGENT

2-9-95

305-746-5511