

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000005841 (0)

1. Corporation Name

HILKAR CONSULTING, INC.

Principal Place of Business

Mailing Address

10001 W. Oakland Park Blvd.
Suite 101
Sunrise, FL 33351

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Suite 101
Sunrise, FL 33351

3. Date Incorporated or Qualified
01/21/1993

3a. Date of Last Report
02/09/1995

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

4. FFI Number
65-0379589

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPIEGEL, HERBERT J.
10001 W. Oakland Park Blvd.
Suite 101
Sunrise, Florida 33351

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 filer if applicable)

(Name, typed or printed name of registered agent and filer if applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	SPIEGEL, HERBERT J	
STREET ADDRESS	7550 SW 42 COURT	
CITY, ST, ZIP	DAVIE, FL 33314	☐ DELETE
TITLE	DST	☐ DELETE
NAME	LEES, ARTHUR F	
STREET ADDRESS	12-20 CAMOMILE ST., ELLERMAN HOUSE	
CITY, ST, ZIP	LONDON, ENGLAND WC3A 7PJ	☐ DELETE
TITLE	D	☐ DELETE
NAME	MARSH, ROGER E.	
STREET ADDRESS	12-20- CAMOMILE ST., ELLERMAN HOUSE	
CITY, ST, ZIP	LONDON, ENGLAND EC3A 7PJ	☐ DELETE
TITLE	D	☐ DELETE
NAME	SKINNER, RONALD	
STREET ADDRESS	12-10 CAMOMILE ST., ELLERMAN HOUSE	
CITY, ST, ZIP	LONDON, ENGLAND EC3A 7PJ	☐ DELETE
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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, unchanged, or in an attachment with an address.

SIGNATURE: PROF. Herbert J. Spiegel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-96 954-746-5511

CR2E034 (12/95)

2/19/96