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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300005841 (0)

HILKAR CONSULTING, INC.

FILED
Jan 17 1997 8:00am
Secretary of State



Principal Place		9	Mailing Address				Ų						
10001 W.OAKLAND PARK BLVD. SUITE 101 SUNRISE FL 33351 US		SUITE 101	10001 W.OAKLAND PARK BLVD. SUITE 101 SUNRISE FL 33351-6925 US										
							3. Date Incorporated or Qualified					eport	
- :	lace of Business	2a. Mailing	Address				4.	FEI Number 65-0379589			<del>+</del> -	plied For	
21 Cuito Ant	# clo	26	lot # oto					00-0018008	····	<u> </u>		t Applicable	
Suite, Apt.		27					5.	Certificate of Status Desire	o 🗆			Additional quired	
City & State	ė	— ·	City & State					Election Campaign Financi Trust Fund Contribution	ng 🔲		\$5.00 May Be Added to Fees		
Zip	Country	Zip	<del> </del>				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No						
24	25 9. Name and Address of Cur	29	nent	30	_			Name and Address of No					
CDIF		ione mognitudo A	90.11		iπ	Name	10.	Traine and Fragility of the	110810101	ou ngoii			
	EGEL, HERBERT J			Ľ									
10001 W. OAKLAND PARK BLVD SUITE 1001								O. Box Number is Not Acc	eptable)				
SUN	NRISE FL 33351			8	33								
				8	14	City		, _ ,	F	85 L	Zip (	Code	
11. Pursuant office or ragent. La	to the provisions of Sections 607.6 registered agent, or both, in the Stim familiar with, and accept the ob-	1502 and 607,1508 ate of Florida, Such digations of, Section	, Florida Statut i change was n 607.0505, Fl	tes, the abo authorized lorida Statul	by tes	named corp the corporal	poration ition's b	n submits this statement for poard of directors. I hereby	the purpos accept the	e of char appointm	iging it ent as	s registered registered	
SIGNATORIL	Signature, typed or printed name of registered	agent and the if applicable	e (NO1	TE Registered A	Ager	nt signature requi	ired when	reinstating)	DAT	E			
12.	OFFICERS A	AND DIRECTORS		13.			A	ADDITIONS/CHANGES TO	OFFICERS A	AND DIRE	CTOR	S IN 12	
TITLE	DP		DELETE	1.1 TITL	E					C	hange	Addition	
NAME	SPIEGEL, HERBERT J			1.2 NAM	1E								
STREET ADORESS	7550 SW 42 COURT			1.3 STR	EET /	ADDRESS							
CITY-ST-ZIP	DAVIE FL 33314			1.4 CITY	/~\$T	r- zip						1	
TITLE	DST		DELETE	2.1 TITL	E			···· ····· ····· ·			hange	Addition	
NAME	Leeks, arthur f			2.2 NAM	łE								
STREET ADDRESS	12-20 CAMOMILE ST., ELLE	RMAN HOUSE		2.3 STRI	EET /	ADDRESS		•					
CiTY - ST - ZiP	LONDON, ENGLAND WC3A			2 4 CIT	 Y • S	r-zie						Ţ	
THILE	D		DELETE	3 1 TITL							hange	Addition	
NAME	MARSH, ROGER E			3.2 NAM	18								
STREET ADDRESS	12-20 CAMOMILE ST., ELLE	RMAN HOUSE		1		ADDRESS							
City-St-ZiP	LONDON, ENGLAND EC3A			3.4. CIT									
TITLE	D		DELETE	4.1 TITL			<del></del>	<u></u>	······		hange	Addition	
NAME	SKINNER, RONALD			4, 2 NA	WE								
STREET ADDRESS	12-20 CAMOMILE ST., ELLE	RMAN HOUSE		43 STR	FFT.	ADDRESS			12. 3.				
CITY-ST-ZIP	LONDON, ENGLAND EC3A			4.4 CITY									
TOLE			DELETE	5.1 TITL	<u> </u>				······································		hange	Addition	
NAME				5.2 NAM							•		
STREET AODRESS				5.3 STR	EET.	ADDRESS							
CITY-ST-Z-P				5.4 CITY		1							
THILE			DELETE	6.1 TITL		<del></del>			<del> </del>		hange	Addition	
NAME			_	6.2 NAN							-		
STREET ADDRESS						ADDRESS							
i													
CITY - ST - ZIP	1			6.4 CITY	اد- ا	i-zir							

. I do 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 for an an attachment with an address?)

SIGNATURE:

Herbert JY Spiegel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

January 9, 1997

(954) 746-5511 Davims Phone \$511