

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000041866

1. Entity Name  
HILER CORPORATION



Principal Place of Business  
9991 SW 127TH TERRACE  
MIAMI, FL 33176

Mailing Address  
9991 SW 127TH TERRACE  
MIAMI, FL 33176

FILED  
Apr 14, 2004 08:00 AM  
Secretary of State



01202004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0505652

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PERLIN, BRIAN C  
334 MINORCA AVENUE  
SUITE 200  
CORAL GABLES, FL 33134

DO NOT WRITE  
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000112525  
04/14/04-80027-007 150.00

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HILER, JESSIE M  
9991 SW 127TH TERRACE  
MIAMI, FL 331764833

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DO NOT WRITE  
IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jessie M. Hiler*

Jessie M. Hiler

4-12-04

305 378-5793

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #