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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name

SIGNATURE: /

P94000076296 (0)

W F HILLER ASSOCIATES, INC.

Principal Place of Business Mailing Address 2234 W. ALTANTIC AVENUE 5226 SAPPHIRE VALUE DELRAY BEACH FL 33445 BOCA RATION FL 3348					
PERSON PERSON I C WITH		US		3. Date incorporated or Qualified 10/17/1994	3a. Date of Last Report 04/12/1995
2. Principal Pla	ace of Business	2a. Ma'ling Address	× / 11	4. FEL Number	Applied For
21		26 5226 SAPP	HRE VALLEY	65-0540044	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country	Zp	Country	8. This corporation has liability for	
[4]	25 9. Name and Address of Currer	29 Agent	[30]	Florida Statutes Yes 10. Name and Address of New R	No
		Y	81 Name	To the state of th	egiatored Agent
HILLER 1	WALTER F				
	PPHIRE VALLEY		82 Street A	ddress (P.O. Box Number is Not Acceptab	rle)
BOCA RATON FL 33486		83			
			84 City		
				ocration submits this statement for the pur	FL 85 Zip Code
12.	Sejredure it part or pretical real información regionéral a part OFFICERS AN	D DIRECTORS	a 911. Registered Agost signature not	and and relating ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TITLE	CPT	☐ DELETE	1 1 TOLE	PTD	Change 🔲 Addition
NAME	HILLER, WALTER F		i 12 NAME		
STREET ADDRESS	5226 SAPPHIRE VALLEY BOCA RATON FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DV	["] DELETE	2 11/LE		Change D Addition
NAME	HILLER, JOHN F.	F1 525.5	2.2 NAME		Change C Addition
STREET ADDRESS	6849 TOWN HARBOUR BLVD	#1525	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		2 4 CiTy - St - ZiF		
TITLE	DS	☐ DELEJE	3. 1 101LE		Change Addition
NAME	HILLER, SCOTT A.		3.2 NAME		
\$1REFF ADDRESS	6849 TOWN HARBOUR BLVD	#1524	3.3 STREET ADDRESS		
CITY ST-ZIP	BOCA RATON GL	- Double	3 4 CITY ST ZIF		
	UILLED AMOTUA N	DELETE	4 1 1II.E	CD	Change 🔲 Addition
ŀ	HILLER, MARTHA D.		4 2 NAME		
NAME	5226 SADDHIDE VALLEY		4.3 STREET ADDRESS		
NAME STREET ADDRESS	5226 SAPPHIRE VALLEY BOCA RATON FI		4.4.0(1): 0: 10		
NAME STREET ADDRESS CITY+SY+ZIP	BOCA RATON FL	□ DELETF	44 CITY - S1 - ZP		Chapos C Addition
NAME STREET ADDRESS CITY+SY+ZIP TITLE		DEL ETE	4.4 CITY - S1 - Z P 5.1 TITLE 5.2 NAME		☐ Change ☐ Addition
NAME Street Aodress City - St - Zip Title Name		DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME STREET AODRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS		☐ DELETE	5 1 TITLE 52 NAME 53 STREET ADDRESS		☐ Change ☐ Addition
NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREFT ADDRESS CITY - ST - ZIP		☐ DELETE	5 1 TITLE 5 2 NAME		Change Addition
NAME STREET ADDRESS CITY - SY - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE			5 1 TITLE 5 2 NAME 5 3 STREET ADURESS 5 4 CUTY - ST - ZIP		
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LUCCESIGNING OFFICER OF DIRECTOR

DRUSIANA

1-29-46 107-274-7007