2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 19, 2004 8:00 am Secretary of State **DOCUMENT # P95000024085** 1. Entity Name 04-19-2004 90329 019 ***150.00 HILLBERN, INC. Principal Place of Business Mailing Address 13811 S.W. 52ND PLACE 13811 S.W. 52ND PLACE FORT LAUDERDALE, FL 33330 FORT LAUDERDALE, FL 33330 3. Mairing Address 2. Principal Place of Business 21055 Yacht Club Dr 21055 Yacht Club Dr Suite, Apt. #. etc. Suite. Apt. #, etc. 02052004 CR2E034 (10/03) Chg-P 307 307 Applied For City & State City & State 4. FEI Number Aventura, 59-3307149 Not Applicable <u>Aventura</u> Country Zip \$8.75 Additional 5. Certificate of Status Desired 33180 USA 33180 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Bonnie Bernstein BERNSTEIN, JEROME Street Address (P.O. Box Number is Not Acceptable) 12000 BISCAYNE BLVD. 1055 Yacht Club Dr. SUITE 810 MIAMI, FL 33181 Zip Code 33180 City Aventure 8. The above named entry 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 of registered agent. the obligations MATUM Bonnie Bernstein SIGNATURI (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEÉ IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE D De ete TITLE PDTS ☐ Change → Addition BERNSTEIN, JEROME Bonnie Bernstein 21055 Yacht Club Dr. #307 NAME NAME 13811 SW 52ND PLACE STREET ADDRESS STREET ADDRESS FT. LAUDERDALE, FL 33330 CITY-ST-7IP Aventura, FL 33180 CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY:: ST-ZIP CITY+ST-ZIP-TITLE Delete ☐ Change Addition KAME KAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE De ete TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-St-7P CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TIT: F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP supplied with this tring does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I turther certify that the information ental 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 trustee empoyered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 if an address, with all other like empowered. 12. I hereby certify that the informat indicated on this report or supp mental report is true of the corporation or the re changed, or on an attachy Bonnie Bernstein SIGNATURE: Daytore Phone # Dinto

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