

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000044312 (2)

1. Corporation Name

HIL (USA) GROUP, INC.

Principal Place of Business

**520 Brickell Key Drive
Suite 0-305
Miami, FL 33131**

Mailing Address

**520 Brickell Key Drive
Suite 0-305
Miami, FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/23/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0669757

Applied For

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 Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Freeman, Stephen A.
520 Brickell Key Drive, Suite 0-305
Miami, FL 33131**

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, or by the sole officer or shareholder, as the case may be, and I, the undersigned, am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

*****150.00**

SIGNATURE

Signature of the person filing this report (if not the same as the person filing this report, the signature of the person filing this report is required)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	President ☐ DELETE
NAME	Kaplan, Jack O.
STREET ADDRESS	5760 S.W. 118th Street
CITY-ST-ZIP	Miami, FL 33156
TITLE	Vice President ☐ DELETE
NAME	Kaplan, Shirley
STREET ADDRESS	5760 S.W. 118th Street
CITY-ST-ZIP	Miami, FL 33156
TITLE	Secretary ☐ DELETE
NAME	Freeman, Stephen A.
STREET ADDRESS	520 Brickell Key Drive, Suite 0-305
CITY-ST-ZIP	Miami, FL 33131
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY-ST-ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	
31. TITLE	☐ Change ☐ Addition
32. NAME	
33. STREET ADDRESS	
34. CITY-ST-ZIP	
41. TITLE	☐ Change ☐ Addition
42. NAME	
43. STREET ADDRESS	
44. CITY-ST-ZIP	
51. TITLE	☐ Change ☐ Addition
52. NAME	
53. STREET ADDRESS	
54. CITY-ST-ZIP	
61. TITLE	☐ Change ☐ Addition
62. NAME	
63. STREET ADDRESS	
64. CITY-ST-ZIP	

14. 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 annual report or supplement to an 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 sole officer or shareholder, or I am a person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am an officer or director of the corporation.

SIGNATURE:

STEPHEN A. FREEMAN

4/28/98 (305) 371-3600

CR2E034 (10/97)