

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000020745

**FILED**  
**Mar 08, 2010**  
**Secretary of State**

**Entity Name:** BOB HILSON & COMPANY NORTH, INC.

**Current Principal Place of Business:**

599 W. MOWRY DRIVE  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 901543  
HOMESTEAD, FL 33090

**New Mailing Address:**

**FEI Number:** 65-0818385

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILSON, ROBERT B  
164 BAHAMA AVE.  
KEY LARGO, FL 33037 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HILSON, ROBERT B  
Address: 599 W MOWRY DRIVE  
City-St-Zip: HOMESTEAD, FL 33030

Title: STD  
Name: AROSTEGUI, GONZALO  
Address: 10380 SW 201 TERR  
City-St-Zip: MIAMI, FL 33189

Title: VPD  
Name: TOROK, TIBOR  
Address: 19345 SW 312 ST  
City-St-Zip: HOMESTEAD, FL 33030

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GONZALO AROSTEGUI

ST

03/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date