

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S81216** (1)

1. Corporation Name

ROBAR-HILTON, INC.



Principal Place of Business

**9540 HARDING AVE
SURFSIDE FL 33154**

Mailing Address

**9540 HARDING AVE
SURFSIDE FL 33154**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**HILTON, MARK
9540 HARDING AVE
SURFSIDE FL 33154**

3. Date Incorporated or Qualified
09/19/1991

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0291413

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

ROBAR, WILLIAM

82 Street Address (P.O. Box Number is Not Acceptable)

9540 HARDING AVENUE

83 City

SURFSIDE

FL

85 Zip Code

33154

11. Pursuant to the provisions of Sections 607.01(2) 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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations imposed by s. 607.0505, Florida Statutes.

SIGNATURE

William Robar

PRESIDENT

AUGUST 1, 1996

12.

OFFICERS AND DIRECTORS

TITLE

D

NAME

ROBAR, WILLIAM

STREET ADDRESS

**9540 HARDING AVE
SURFSIDE FL**

CITY - ST - ZIP

TITLE

D

NAME

HILTON, MARK

STREET ADDRESS

**9540 HARDING AVE
SURFSIDE FL**

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

☐ Change ☐ Addition

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

☐ Change ☐ Addition

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

☐ Change ☐ Addition

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

☐ Change ☐ Addition

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

☐ Change ☐ Addition

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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, and that I am empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

William Robar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

AUGUST 1, 1996

305 861-8889