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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # 601079

**/**@\

1. Corporation	AN HERMETICS OF LOUIS	\						
5616 SALMEN ST. C/O GEORGE HERMETICS. INC. HARAHAN LA 70123		5616 SALMEN ST. C/O GEORGE HERMETICS. INC. HARAHAN LA 70123-6955				4.1		
U\$		U\$				3. Date Incorporated or Qualified   3e. Date of Last Report   05/16/1979   07/24/1996		•
2. Principal Pi	ace of Business	2a. Mailing Address	,			4. FEI Number	<del></del>	Applied For
21		26				59-1914497		Not Applicable
Suite, Apt	ਜੇ, eta	Suite, Apt. #, etc.	<del> </del>			5. Certificate of Status Desired		Additional Required
City & State	1	City & State	City & State			6. Election Campaign Financing		May Be
23	,	28				Trust Fund Contribution		u may be of to Fees
Zψ	Country	Ζφ	Cou	intry		8. This corporation has liability for	<del></del>	
24	25	29	30			Florida Statutes	Yes No	
	9. Name and Address of Curre	nt Registered Agent		241		10. Name and Address of New Re	gistered Agent	
	CORP SYSTEM			81 1	Name			
1200 SOUTH PINE ISLAND RD PLANTATION FL 33324				82 5	treet Address (P.O. Box Number is Not Acceptable)			
,				83		······································	<del>/</del>	
				84 (	City		gma 85 Zir	) Code
44 0	the same of Continue COT OF	00 and 007 1509 Florido Plate	too the of			oration submits this statement for the p	FL 00 21	ite registered
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat	e of Florida. Such change was	authorize	d by th	arned corpo e corporatio	on's board of directors. I hereby accep	or changing of the appointment a	is registered
agent. Lad	m familiar with, and accept the oblig	gations of, Section 607.0505, F	lorida Stat	tutes				
SIGNATURE	Sign stark input to procedural elektropidered at	ent and title / acclicable (NO	TE Registere	d Agent s	innature requirer	d when reinstating)	DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		PS IN 12
THILE	PD	DELETE	1.1 TITLE				Change	Addition
NAME	DUBROCA, JAMES T JR		1.2 NAME					
STREET ADDRESS	5616 SALMEN STREET		1.3 STREET ADDRESS		Dress			
CHY-S1-24*	HARAHAN LA			ITY - ST - Z	iP .			
TITLE	V	☐ DELETE	2.170				Change	Addition
NAME				2.2 NAME				
STREE! ADDRESS	5616 SALMEN STREET			TREET AD				
City - ST - ZiP	HARAHAN LA STD DELEFE			2. 4 City-ST-ZiP			Change	Addition
TITLE	DUBROCA, JUDY ANN		1	3.1 TITLE 3.2 NAME			Ling (Inditys	L. Modifici
NAME STREET ADDRESS	5616 SALMEN STREET			anic Treet ad	DARESS			
City - \$1 - 7IP	HARAHAN LA		- 1	CITY-ST-	\ \			
TITLE				ITLE			Change	Addition
Name	•		4 2 N	LAME				
STREET ADDRESS			435	TREET AD	DAESS			
CITY - S.t - ZiP			4.4 C	ПY- <u>\$</u> Т-7	MP			
THILF		☐ DEŁETE	5.1 TI	ITLE			Change	Addition
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET AD	DRESS			
CHY-ST ZIP		Latiere	5.4 CITY - ST-Z		IP		Change	e
TITLE		☐ DELETE		6.1 TITLE			L. Grange	MOULDON C
NAME CONTRADESCIO			6.2 N		DDECC			
STREET ADDRESS				TREET AD HTY-\$1-2				
0 1Y-S1-ZIP 14. I do heret	by certify that the information suppli	ed with filing does not qua				in Section 119.07(3)(i), Florida Statute	s. I further certify that	at the
in ferrenantin	e judgested on this annual report or	supprisonated applied report is	true and	OCCUE	to and that i	my signature shall have the same lega as required by Chapter 607, Florida S	al ettect se if made i	inder oath: that

SIGNATURE:

AND TYPE DOWN PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

**FILED** 

Feb 19 1997 8:00am

Secretary of State