## 2005 FOR PROFIT CORPORATION - ANNUAL REPORT

## Apr 30, 2005 08:00 AM Secretary of State DOCUMENT # P00000089271 HERMIDA INVESTMENTS, INC. Principal Place of Business Mailing Address 3438 UNIVERSITY BLVD #14 3438 UNIVERSITY BLVD #14 WINTER PARK, FL 32792 WINTER PARK, FL 32792 04272005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2275612 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HERMIDA, ANTONIO DO NOT WRITE 3438 UNIVERSITY BLVD #14 WINTER PARK, FL 32792 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME HERMIDA, ANTONIO STREET ADDRESS 3833 HERITAGE OAK COURT CITY-ST-ZIP OVIEDO, FL 32765 U000000349532 05/02/05-80068-024 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-SY-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP TITLE

STREET ADDRESS

**FILED**