

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060728

FILED  
May 01, 2008  
Secretary of State

Entity Name: HES OF MIAMI, INC.

**Current Principal Place of Business:**

14540 GLENCAIRN RD  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

14540 GLENCAIRN RD  
MIAMI LAKES, FL 33016

**New Mailing Address:**

FEI Number: 03-6092636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEREZ, DINAH H  
14540 GLENCARIN ROAD  
MIAMI LAKES, FL 33016 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PEREZ, DINAH H  
Address: 14540 GLENCAIRN ROAD  
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP ( ) Delete  
Name: EISERMANN, JUERGEN  
Address: 6861 FEARN DR  
City-St-Zip: MIAMI LAKES, FL 33014

Title: S ( ) Delete  
Name: SAMOWITZ, HARVEY  
Address: 250 SOUTH ISLAND  
City-St-Zip: GOLDEN BEACH, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DINAH H. PEREZ

P

05/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date