

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 13 PM 1:53

DOCUMENT # 365069

(4)

1. Corporation Name

HERCAP LAND DEVELOPMENT, INC.

Principal Place of Business

**658 BIRD RD.
CORAL GABLES FL 33146**

Mailing Address

**658 BIRD RD.
CORAL GABLES FL 33146**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1970

3a. Date of Last Report

03/16/1994

2. Principal Place of Business

2a. Mailing Address

21 8620 S.W. 102 AVENUE

26 8620 S.W. 102 AVENUE

4. FEI Number

59-1353433

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

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

23. City & State

23 MIAMI, FL

28. City & State

28 MIAMI, FL

24. Zip

24 33173

Country

29. Zip

29 33173

Country

30 33173

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GONZALEZ, RICORDO
658 BIRD ROAD
CORAL GABLES FL 33146**

81. Name

GUILLERMO GONZALEZ

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

8620 S.W. 102 AVENUE

83.

84. City

MIAMI

FL

85. Zip Code

33173

11. Pursuant to the provisions of Sections 607.0502 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 of, Section 607.0505, Florida Statutes.

SIGNATURE

Guillermo Gonzalez

2/21/95

(Signature, typed or printed name of registered agent and his representative)

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **GONZALEZ, RICARDO**
STREET ADDRESS **658 BIRD ROAD**
CITY, ST, ZIP **CORAL GABLES FL**

TITLE **SD**
NAME **GONZALEZ, GUILLERMO**
STREET ADDRESS **8620 S.W. 102 AVENUE**
CITY, ST, ZIP **MIAMI FL**

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

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **GONZALEZ, GUILLERMO**
1.3 STREET ADDRESS **8620 S.W. 102 AVENUE**
1.4 CITY, ST, ZIP **MIAMI, FL 33173**

2.1 TITLE **SD** ☒ Change ☐ Addition
2.2 NAME **GONZALEZ, PATRICIA L.**
2.3 STREET ADDRESS **8620 S.W. 102 AVENUE**
2.4 CITY, ST, ZIP **MIAMI, FL 33173**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

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)(b), 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 or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Guillermo Gonzalez, **GUILLERMO GONZALEZ**

(Signature and typed or printed name of signing officer or director)

3/27/95

DATE

(305) 274-9719

(Telephone Number)