FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1997**

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

FILED
Mar 18 1997 8:00am
Secretary of State

DOCUMENT # 365069 **(4)**

1. Corporation Name
HERCAP LAND DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
8620SW 102ND AVENUE MIAMI FL 33173 US	8620 SW 102ND AVENUE MIAMI FL 33173-3943 US

3. Date Incorporated or Qualified: **06/04/1970**
3a. Date of Last Report: **04/23/1996**
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

2. Principal Place of Business
21
Suite, Apt #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt #, etc.
27
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**
GUILLERMO GONZALEZ
8620 SW 102ND AVENUE
MIAMI FL 33173

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 ____ DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	[ ] DELETE	1 1 TITLE	[ ] Change [ ] Addition
NAME	GONZALEX, GUILLERMO		1 2 NAME	
STREET ADDRESS	8620 SW 102ND AVENUE		1 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		1 4 CITY-ST-ZIP	
TITLE	SD	[ ] DELETE	2 1 TITLE	[ ] Change [ ] Addition
NAME	GONZALEZ, PATRICIA L		2 2 NAME	
STREET ADDRESS	8620 SW 102ND AVENUE		2 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		2 4 CITY-ST-ZIP	
TITLE		[ ] DELETE	3 1 TITLE	[ ] Change [ ] Addition
NAME			3 2 NAME	
STREET ADDRESS			3 3 STREET ADDRESS	
CITY-ST-ZIP			3 4 CITY-ST-ZIP	
TITLE		[ ] DELETE	4 1 TITLE	[ ] Change [ ] Addition
NAME			4 2 NAME	
STREET ADDRESS			4 3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY-ST-ZIP	
TITLE		[ ] DELETE	5 1 TITLE	[ ] Change [ ] Addition
NAME			5 2 NAME	
STREET ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			5 4 CITY-ST-ZIP	
TITLE		[ ] DELETE	6 1 TITLE	[ ] Change [ ] Addition
NAME			6 2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY-ST-ZIP			6 4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE [illegible] 2/10/97 (305)274-9019