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

PROFIT CORPORATION ANNUAL REPORT



528490

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS (6)

DOCUMENT # 1. Corporation Name	528490	
HEDITAL CONOTOLICTION OFFICER AND		

HEHMAN CONSTRUCTION SERVICES, INC. Principal Place of Business Mailing Address 10291 NW 46TH ST 10291 N.W 46TH ST. SUNRISE FL 33351-7964 SUNRISE FL 33351-7964 3. Date Incorporated or Qualified 3s. Date of Last Report 02/25/1977 01/26/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1722821 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required Orty & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 29 24 25 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name HERMAN, GENE L 82 Street Address (P.O. Box Number is Not Acceptable) 11301 SHADY LANE PLANTATION FL 33325 83 84 City Zip Code 85 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 Skyrutrire, typed or printed haline of registered agent and tille if applicable (NOTE Registered Agent signature required when reinstalling) DATE 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 7111.8 1 1 TITLE Change Addition HERMAN, GENE L. NAME 1.2 NAME CR2E034 11301 SHADY LANE STREET ADDRESS 13 STREET ADDRESS PLANTATION FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition HERMAN, COLLETTE M. NAME 22 NAME 11301 SHADY LANE STREET ADDRESS 2 3 STREET ADDRESS PLANTATION FL CITY: ST- ZIP 2.4 CITY - ST - ZIP TITLE □ DELETE 3 1 TITLE Change Change ☐ Addition HERMAN, DAVID S. NAME 3.2 NAME 417 NE 15TH AVENUE STHEE: ADDRESS 3.3 STREET ADDRESS PLANTATION FL CHY-ST ZIP 3.4 CITY - ST-ZIP THEF DELETE 4.1 TITLE Change ☐ Addition HERMAN, THOMAS A NAM: 4.2 NAME 6701 CYPRESS RD #303 STREET ADDRESS. 4.3 STREET ADDRESS PLANTATION FL CITY-ST-ZIP 44 CITY - ST - ZIP TITLE DELETE 5 1 TITLE ☐ Change ■ Addition DUVERNOIS, DENNIS F NAMe 5.2 NAME 10720 NW 10TH ST STREET ADDRESS 5.3 STREET ADDRESS PLANTATION FL CITY - S1 - ZIF 5 4 CITY-ST-ZIP TilliE DELETE 6 1 TITLE Change ■ Addition

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)(k), 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 chapter 607, or on an attachment with an address.

62 NAME

6.3 STREET ADDRESS 6 4 CITY - ST - ZIP

SIGNATURE:

NAME

STREET ADDRESS

DHID HERMIN

954.749-1800