

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 528490**

1. Entity Name

HERMAN CONSTRUCTION SERVICES, INC.**FILED****Feb 01, 2001 8:00 am**
Secretary of State

02-01-2001 90046 005 ***150.00

Principal Place of Business

**10291 N.W. 46TH ST.
SUNRISE FL 33351-7964**

Mailing Address

**10291 N.W. 46TH ST.
SUNRISE FL 33351-7964**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1722821**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**HERMAN, GENE L
11301 SHADY LANE
PLANTATION FL 33325**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-22-019. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	HERMAN, GENE L	
STREET ADDRESS	11301 SHADY LANE	
CITY-ST-ZIP	PLANTATION FL	

TITLE	ST	☐ Delete
NAME	HERMAN, COLLETTE M.	
STREET ADDRESS	11301 SHADY LANE	
CITY-ST-ZIP	PLANTATION FL	

TITLE	V	☐ Delete
NAME	HERMAN, DAVID S.	
STREET ADDRESS	108 18TH AVENUE	
CITY-ST-ZIP	SAINT PETERSBURG FL 33706	

TITLE	V	☐ Delete
NAME	HERMAN, THOMAS A	
STREET ADDRESS	12040 NW 10 ST	
CITY-ST-ZIP	PLANTATION FL 33325	

TITLE	V	☐ Delete
NAME	DUVERNOIS, DENNIS F	
STREET ADDRESS	10720 NW 10TH ST	
CITY-ST-ZIP	PLANTATION FL	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis DuVerneis

Date

Daytime Phone #

1-22-01 954-749-1800

CR2E034 (10/00)