## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 528490**

FILED Jan 11, 2008 Secretary of State

Entity Name: HERMAN CONSTRUCTION SERVICES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	V 46TH ST. FL 333517964	1			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	V 46TH ST. FL 333517964	1			
FEI Number	: 59-1722821	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
PLANTAT The above	ADY LANE ION, FL 33325		ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI					
lection Ca	Electron	ic Signature of Registered Age	ent	Date	
	Electron	Trust Fund Contribution ( ).		Date GES TO OFFICERS AND DIRECTOR	
	Electron mpaign Financing	TORS: Delete E.L., ANE			
DFFICER. Title: Name: Address: Dity-St-Zip: Title: Name: Address:	Electron mpaign Financing S AND DIREC  P () HERMAN, GENI 11301 SHADY L PLANTATION, F	Trust Fund Contribution ( ).  FORS:  Delete E L., ANE L  Delete LETTE M., ANE	ADDITIONS/CHANC Title: Name: Address:	GES TO OFFICERS AND DIRECTOR	
OFFICER Title: Name: Address:	Electron  mpaign Financing  S AND DIREC  P () HERMAN, GENI 11301 SHADY I PLANTATION, F  ST () HERMAN, COLI 11301 SHADY I PLANTATION, F  V () HERMAN, DAVI 12200 1ST STR	Trust Fund Contribution ( ).  FORS:  Delete E.L., ANE L  Delete LETTE M., ANE L  Delete	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	
DFFICER  Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Address: Name: Address:	Electron mpaign Financing S AND DIREC P () HERMAN, GENI 11301 SHADY I PLANTATION, F ST () HERMAN, COLI 11301 SHADY I PLANTATION, F V () HERMAN, DAVI 12200 1ST STR TREASURE ISL	Trust Fund Contribution ( ).  FORS:  Delete E L., ANE L  Delete .ETTE M., ANE L  Delete D S., EET WEST, #401 AND, FL 33706  Delete MAS A	ADDITIONS/CHANC Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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:	DENNIS DUVERNOIS	VP	01/11/2008