FILED Apr 30, 1999 8:00 am Secretary of State

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## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 552655

1. Corporation Name

HERBKO INTERNATIONAL INCORPORATED

Principal Place	of Business	Mailing Add	iress				1 100701 1	F71W1 W111W 11W1			11 41801	****	
301 W. HALLANDALE BCH BLV 301 W. HALLANDALE BCH BL													
HALLANDALE FL 33009 HALLANDALE FL 33009								DO NO	T WRITE	IN THIS S	SPACE		
						3	Date Incorp						
						1	11/15/19						ļ
2. Principal Place of Business 2a. Mailing Address			Address				FEI Number				$\neg \top$	Appi	ied For
21		26					59-17930	29				Not .	Applicable
			pt. #, etc.			5	Certifcate of	Status De	sired				lditional
22		27					Ochaio oi			<del></del>	Fe	e Req	uired
City & State		City & S	City & State				Election Car		_				lay Be
23		28				<del></del>	Trust Fund					ded to	Fees
Zip	Country Zip			Country	9, 17110 001			s corporation owes the current year Intangible sonal Property Tax.					
24	25	29	30	<u>)</u>			Name and		F Now Re				1110
<u> </u>	9. Name and Address of Current	Registered Ag	jein	81	Name		Hante and	Addiess V	IIGW ICC	gistorea A	gon		
STEE	RNBERG, HERBERT			L.	- I valine								
301 W. HALLANDALE BCH BLVD				82	Street	Address (P.	.O. Box Num	ber is Not	Acceptab	le)			
	ANDALE FL 33009			83	ļ								-
V					<u>[</u>							······································	
				84	City			<u>-</u>		FI	85	Zip Co	ode
44 Duraugnt	to the provisions of Sections 607.0502	2 and 607 1508	Florida Statutes	the above	! e-named	cornoration	submits this	statement	for the pi	urpose of o	hangin	g its re	egistered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida, Such	change was auth	orized by	the corpo	oration's bo	ard of direct	ors. I hereb	y accept	the appoin	tment a	as regi	stered
SIGNATURE													\
	Signature, typed of printed name of registered agen		(NOTE: Re		nt signature re	required when re		CHANCEC	TO OFF!	DATE	DIPE	e TOB	IC IN 12
12.	V OFFICERS AN	DURECTORS	☐ DELETE	13.		<u> </u>	ADDITIONS/	CHANGES	10 OFFI	CERS ANI	Cha		Addition
TITLE	STERNBERG, MARLENE		Deter	1.2 NAME							_		
NAME	4000 ISLAND BLVD. #1501				ADDRESS	3000	Islan	1 B	Ivd	PH5			ĺ
STREET ADDRESS	N MIAMI BCH, FL 00000			1.4 CITY-S		Ruen	tree	FI	73/	60			
CITY-ST-ZIP	PSD PSD		DELETE	2.1 TITLE	1.21	- CAUCA	,				Cha	fhge	Addition
NAME	STERNBERG, HERBERT	· · · · · · · · · · · · · · · · · · ·		2.2 NAME		7.11	tra Is	land	745	•	_		
STREET ADDRESS	4000 ISLAND-BLVD, #1501				TADDRESS	3000	1						
\ \	N MIAMI BCH, FL 00000			2.4 CITY-5		aven	·Tura	FI	33,	160			į
CITY-ST-ZIP	11 1111/1111 2011; 12 00000		DELETE	3.1 TITLE	,. 2	-					Cha	ange	Addition
NAME				3.2 NAME									
STREET ADDRESS				3.3 STREET	TADDRESS								ĺ
CITY-ST-ZIP				3.4. CITY-9									
TITLE			☐ DELETE	4.1 TITLE							Cha	nge	☐ Addition
NAME				4. 2 NAME									
STREET ADDRESS				4.3 STREET	TADDRESS								
CITY-ST-ZIP				4.4 CITY-S									
TITLE			DELETE	5.1 TITLE		1		_			Cha	inge	☐ Addition
NAME				5.2 NAME									
STREET ADDRESS				5.3 STREE	TADORESS								
CITY-ST-ZIP				5.4 CITY-S	T-ZIP								
TITI E			DELETE	6.1 TITLE		<del> </del>					□ Cha	nge	Maddition

14. 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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP