

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # G16882**

1. Entity Name  
**ROBERT M. HERMAN, P.A.**



Principal Place of Business  
**8551 WEST SUNRISE BLVD  
SUITE 102  
PLANTATION, FL 33322-4007**

Mailing Address  
**8551 WEST SUNRISE BLVD  
SUITE 102  
PLANTATION, FL 33322-4007**



04172008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2242728**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**HERMAN, ROBERT M.  
8551 WEST SUNRISE BLVD  
SUITE 102  
PLANTATION, FL 33322-4007**

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

1100000902078

05/06/08-80016-004 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	PST
NAME	HERMAN, ROBERT M.
STREET ADDRESS	8551 WEST SUNRISE BLVD SUITE 102
CITY-ST-ZIP	PLANTATION, FL 333224007
TITLE	D
NAME	HERMAN, ROBERT M.
STREET ADDRESS	8551 WEST SUNRISE BLVD SUITE 102
CITY-ST-ZIP	PLANTATION, FL 333224007
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with any address, with all other like empowered.

**SIGNATURE:**

*Robert M. Herman*  
**ROBERT M. HERMAN**

Date

Daytime Phone #

4/17/08 (954) 617-7000