

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra D. Morton
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED BY MAY 1

DO NOT WRITE IN THIS SPACE.

DOCUMENT # **K03468** (1)
1. Corporation Name
HERVAN CORPORATION

Principal Place of Business
**% HENRY M. TORT
309 11TH STREET, S.W.
RUSKIN FL 33570**

Mailing Address
**% HENRY M. TORT
309 11TH STREET, S.W.
RUSKIN FL 33570**

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
11/18/1987

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2856315

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

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

9. This corporation has liability for intangible tax under S. 193.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
**TORT, HENRY M.
309 11TH STREET, S.W.
RUSKIN FL 33570**

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City
05 FL
06 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: **Henry M. Tort** Vice President
Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered agent signature required when reappointing) DATE: **4-28-95**

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	DE LA BRETESCHE, HERVE
STREET ADDRESS	309 11TH STREET S.W.
CITY - ST - ZIP	RUSKIN FL
TITLE	V
NAME	TORT, HENRY M.
STREET ADDRESS	309 11TH STREET S.W.
CITY - ST - ZIP	RUSKIN FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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)(g), 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.

SIGNATURE: **Henry M. Tort** Henry M. Tort, Vice President 4/25/95 813-645-9527
Signature, typed or printed name of signing officer or director