

# 2001 UNIFORM BUSINESS REPORT (UBR)

0012920 AF

DOCUMENT # L00000005391

1. Entity Name  
HERFIVE ENTERPRISES L.L.C.

FILED

01 APR -9 AM 7:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

140 BONAVENTURE BLVD #201  
WESTON FL 33326

Mailing Address

140 BONAVENTURE BLVD #201  
WESTON FL 33326



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

238 Lakeside Circle

Suite, Apt. #, etc.

Weston

City & State

Weston, FL

Zip

33326

Country

U.S.

3. Mailing Address

238 Lakeside Circle

Suite, Apt. #, etc.

Weston, FL

City & State

Weston, FL

Zip

33326

Country

4. FEI Number

65-1006696

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, JULIAN ANDRES  
140 BONAVENTURE BLVD #201  
WESTON FL 33326

7. Name and Address of New Registered Agent

Name

Hernandez, Julian Andres

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

238 Lakeside Circle

City

Weston

FL

Zip Code

33326

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

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**

9. MANAGING MEMBERS/MEMBERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Member  
Ruben D. Hernandez  
238 Lakeside Circle  
Weston, FL 33326 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Member  
Hernandez, A & Cia. Ltda.  
Calle 45 No. 59-27  
Medellin, Colombia ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

10. ADDITIONS/CHANGES

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
300004034383--9  
-04/20/01--01017--009

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
\*\*\*\*\*50.00 ☐ Change ☐ Addition

TITLE  
NAME  
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☐ Change ☐ Addition

TITLE  
NAME  
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CITY-ST-ZIP  
☐ Change ☐ Addition

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Ruben D. Hernandez 03/15/01 (954) 385-5815

CR2E083 (11/00)