2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 08:00 A Secretary of State

•	AITITUAL	KEPOKI		_	T C C C
DOCUMENT # L60944 1. Entity Name HERFOR, INC.					Secretary of S
Principal Place	e of Business	Mailing Address			
8405 NW 53	ST	PO BOX 526321			
A-211	2100 110	MIAMI, FL 33152 US			
MIAMI, FL 33	3166 US				IN BEHILL MARIN INDER MERNIL WEDE DER IN BEGEL BEWELL ALDER BEHELL BEHELL WEDERLANDE EI EN DE
)			
· · · · · · · · · · · · · · · · · · ·				04182007	No Chg-P CR2E034 (11/05)
	O NOT WRITE	IN THIS SPA	CE	4. FEI Numb	er Applied For
				59-305	· · · · · · · · · · · · · · · · · · ·
		•		5. Certificate	of Status Desired S8.75 Additional
			· · · · · · · · · · · · · · · · · · ·		Fee Required
	6. Name and Address of Current R	ogistered Agent	-		
FORTUN, JUAN E				DO	NOT WRITE
3841 ALCANTARA AVE MAIMI, FL 33178					•
MAIMI, FL	33176			IN.	THIS SPACE
1					A second
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 4/27/07					
SIGNATURE				d when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			ncing \$5	.00 May Be led to Fees	
10.	OFFICERS AND D	DIRECTORS	1	•	
TITLE	D	,	•	•	6
NAME OTREET APPOINTS	FORTUN, JUAN ENRIQUE		٠,		
STREET ADDRESS CITY-ST-ZIP	3841 ALCANTARA AVE		1 .		
TITLE	D		1 ' '		
NAME	FORTUN, CELIA FERNANDEZ		. 27	4 1	<u> </u>
STREET ADDRESS	3841 ALCANTARA AVE		-2		05/15/07-80061-008 150.00
CITY-ST-ZIP	MIAMI, FL	· · · · · · · · · · · · · · · · · · ·	. ·	.,	
TITLE NAME					·
STREET ADDRESS					NOT WOITE
CITY-ST-ZIP				טט	NOT WRITE
TITLE			1	· IN	THIS SPACE
NAME				314	THIS STAGE
STREET ADORESS CITY-ST-ZIP	1				· · · · · · · · · · · · · · · · · · ·
TITLE			-	à .	
NAME				•	
STREET ADDRESS				,	
CITY-ST-ZIP			_	"	
TITLE			1	•	
NAME CTREET ADOPECE				. 1	
STREET ADDRESS CITY-ST-ZIP				- * •	
, -	I	•		·	

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 an additional content of the corporation of the receiver or trustee empowered.

SIGNATURE:

SIGNATURE AND TY

TUANE, FORTH

4/27/07

305-599-8480

Daytme Phone #