

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

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90236 017 ***150.00

DOCUMENT # L93016

1. Corporation Name
HERRERA GROUP, INC.

Principal Place of Business
2900 W 84TH STREET #201
HIALEAH FL 33016

Mailing Address
2900 W 84TH STREET #201
HIALEAH FL 33016



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/14/1990

4. FEI Number
65-0216565

Applied For
Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. Yes ☐ No ☐

2. Principal Place of Business

2a. Mailing Address

21 3789 West 18 Ave.

26 3789 West 18 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Hialeah FL

28 Hialeah FL

Zip Country

Zip Country

24 33012 25 USA

29 33012 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERRERA, CARLOS
2900 W 84TH STREET #201
HIALEAH FL 33016

81 Name Carlos Herrera

82 Street Address (P.O. Box Number is Not Acceptable)
3789 W. 18 Avenue

83

84 City Hialeah FL 85 Zip Code 33012

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/6/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PST
NAME HERRERA, CARLOS
STREET ADDRESS 2900 W 84TH ST #201
CITY-ST-ZIP HIALEAH FL

1.1 TITLE PST
1.2 NAME Herrera, Carlos
1.3 STREET ADDRESS 3789 W. 18 Ave.
1.4 CITY-ST-ZIP Hialeah, FL

TITLE D
NAME HERRERA, CARLOS
STREET ADDRESS 2900 W 84TH ST #201
CITY-ST-ZIP HIALEAH FL

2.1 TITLE D
2.2 NAME Herrera, Carlos
2.3 STREET ADDRESS 3789 W. 18 Ave.
2.4 CITY-ST-ZIP Hialeah, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/99 (305) 362-1664

CR2E034 (11/98)

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