## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # (0) M07178 HERBART ENTERPRISES, INC. Principal Place of Business Mailing Address 5231 SW 18TH STREET 5231 SW 18TH STREET PLANTATION FL 83317 PLANTATION FL 33317 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/31/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2477324 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HAHAMOVITCH, DONALD E. 7770 WEST OAKLAND PARK BLVD SUTIE 470 Street Address (P.O. Box Number is Not Acceptable) SUNRISE FL 33351 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 a gnature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE SCHWEBEL, ARTHUR NAME 1.2 NAME **5231 SW 18TH STREET** STREET ADDRESS 1,3 STREET ADDRESS PLANTATION FL 1.4 CITY - ST - ZIP CITY-ST-ZIP

STD DELETE Change Addition TITLE 2.1 TITLE SCHWEBEL, SYLVIA 22 NAME NAME 5231 SW 18TH STREET STREET ADDRESS 2.3 STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition VD TITLE 3.1 TITLE LAZAR, HERBERT 3.2 NAME NAME 5805 S BAYBERRY LANE STREET ADDRESS 3.3 STREET ADDRESS tamarac fl 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ Addition DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP 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.

CICNIATIBE.