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

FILED Mar 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (7)M95464 LARRY HERR, INC. Principal Place of Business Mailing Address *** LARRY HERR** % LARRY HERR S2 CEDAR RD. 32 CEDAR RD. HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/23/1988 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0069623 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. 24 29 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HERR, LARRY 32 CEDAR RD. 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 84 City Zip Code 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 frame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change 11 TITLE TITLE HERR, LARRY 12 NAME NAME 32 CEDAR RD. 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 3.1 TITLE ☐ Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-\$1-ZIP DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZIP CITY-ST-ZIP Change DELETE Addition 6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

530-4476

6.4 CITY-ST-ZIP 14. Thereby 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.

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP