2001 UNIFORM BUSINESS REPORT (UBR)

Jun 15, 2001 8:00 am Secretary of State DOCUMENT # P00000091688 1. Entity Name 06-15-2001 90170 026 ***150.00 D & D HERMON, P.A. Principal Place of Business Mailing Address AUU/3425 ~~ 7120 VIA MARBELLA 2120 VIA MARRELLA BOCA RATON FL 33433 **80CA RATON FL 33433** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4.-FEI Number... OS-10447 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent teremo~ GIRNUN, MORRIS A Street Address (P.O. Box Number is Not Acceptable) 7120 VIA MARBELLA **BOCA RATON FL 33433** City Zip Code 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. DATE of registered agent and title if applicable. FILE NOW!!! FEE IS:\$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition CR2E034 (10/00) TITLE ☐ Delete NAME HERMON, DANNY MAME STREET ADDRESS STREET ADDRESS 7120 VIA MARBELLA CITY-ST-ZIP CITY-ST-7/P **BOCA RATON FL 33433** ۷۷ گ TITLE ☐ Delete TITLE Change Addition HERMON, DEBORAH NAME NAME STREET ADDRESS 7120 VIA MARBELLA STREET ADDRESS CITY-ST-ZIP CITY-\$1-71P **BOCA RATON FL 33433** TITLE ☐ Delete TITLE ☐ Channe ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition. Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP CITY-ST-7IP 13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

Daytime Phone (

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

June 1, 2001

D & D HERMON, P.A. 7120 VIA MARBELLA BOCA RATON, FL 33433

Subject: D & D HERMON, P.A.

Reference

P00000091688

Number:

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

The check submitted is not payable to this office. Please make your check payable to the Department of State.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

Lyou have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/sr

ANNUAL REPORTS SECTION