## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 29, 2004 08:00 AM Secretary of State **DOCUMENT # P01000073724** 1. Entity Name HERMA ENTERPRISES, INC. Principal Place of Business Mailing Address 8838 112TH TERRACE 8838 112TH TERRACE MIAMI, FL 33018 MIAMI, FL 33018 No Chg-P CR2E034 (10/03) 04262004 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1141147 No Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent JAEAMILLO, HERNANDO 88: 112TH TERRACE DO NOT WRITE M₅.M., FL 33018 IN THIS SPACE 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 in am familiar with land accept the obligations of registered agent. Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. **PSTD** TITLE JARAMILLO, HERMANDO NAME B13603141994 8838 112TH TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33018 DEPOSITE FOR PROPERTY OF THE PERSON OF THE P NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

**FILED** 

SIGNATURE:

HERNANDO JARAMILLO PRESIDENT 04/23/2004 305 557 6608

SIGNATURE AND TYPED OR PRINTED MARKE OF SKINING OFFICER OR DIRECTOR

Oate

Oate

Oate

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes: Utuctive certify has the extormal section 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 orall true and officer or circular 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 address, with all other like empowered.