2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000012336

1. Entity Name FRANCISCO HERRERA INC.



FILED May 01, 2006 08:00 AN Secretary of State

Daytime Phone #

Principal Place of Business

SIGNATURE: _

Mailing Address

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IMMOKALEE,		MMOKALEE, FL 34142					
D	O NOT WRITE I	CE	04272006 4. FEI Numbe 20-0568 5. Certificate		п (Applied For Not Applicable 8.75 Additional Required	
Name and Address of Current Registered Agent							
1811 SHEE	, FRANCISCO RMAN AVE EE, FL 34142	DO NOT WRITE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tale if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150,00 ny 1, 2006 Fee will be \$550.00	noing \$5	.00 May Be led to Fees				
10,	OFFICERS AND DIRE	CTORS	I				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERRERA, FRANCISCO 1811 SHERMAN AVE IMMOKALEE, FL 34142			.	UDÓQ: 05/11/0)05447 3-8004	06 7-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4			NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			, , ,		THIS SP	ACE	
TITLE NAME STREET AODRESS' CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
indicated of the con	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowers or on an attachment with an address, with a	and accurate and that my signs: ed to execute this report as requi	emptions contained ture shall have the red by Chapter 60	d in Chapter 119 same legal effec 7, Florida Statute	, Florida Statutes. I t as if made under c s; and that my name	further certinath, that i as appears in	y that the information n an officer of director Block 10 or Block 11 if