


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000134744
1. Entity Name
HERRERAS CONSTRUCTION GROUP, INC.



Principal Place of Business Mailing Address
620 JANN AVENUE 620 JANN AVENUE
OPA LOCKA, FL 33054 OPA LOCKA, FL 33054

DO NOT WRITE IN THIS SPACE



04232007 No Chg-P CR2E034 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 20-3572404 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

HERRERA, JUAN D
620 JANN AVENUE
OPA LOCKA, FL 33054

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000734346
05/09/07-80123-005 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HERRERA, JUAN D 620 JANN AVENUE OPA LOCKA, FL 33054 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VT HERRERA, MARIA G 620 JANN AVENUE OPA LOCKA, FL 33054 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S HERRERA, OSCAR 620 JANN AVENUE OPA LOCKA, FL 33054 |
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Maria G Herrera*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/2007 (305) 685-8071
Date Daytime Phone #