

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P32886

1. Entity Name
HERMAN SIROTA ENTERPRISES, INC.



Principal Place of Business
**1080 BRIAR RIDGE ROAD
WESTON, FL 33327**

Mailing Address
**106 S MAIN STREET
VERSAILLES, KY 40383**

DO NOT WRITE IN THIS SPACE



04242008 No Chg-P CR2E034 (11/05)

4. FEI Number
61-0932233

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SIROTA, HERMAN
1080 BRIAR RIDGE ROAD
WESTON, FL 33327**

**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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	SIROTA, HERMAN
STREET ADDRESS	1080 BRIAR RIDGE ROAD
CITY-ST-ZIP	WESTON, FL 33327
TITLE	SD
NAME	SIROTA, ROBERT
STREET ADDRESS	16691 SOUTH WEST 49TH STREET
CITY-ST-ZIP	SOUTHWEST RANCHES, FL 33331
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000927125
05/20/08-80093-017 150.00

**DO NOT WRITE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/2008

Date

Daytime Phone #

HERMAN SIROTA