FILED May 07, 2004 08:00 AM te

ANNUAL REPORT					Secretary of Stat			
	MENT # P930000328			, -		- J		
1. Entity Name HERSO'S	CORPORATION							
Principal Place of Business 1131 SORRENTO DRIVE FT. LAUDERDALE, FL 33326 Maiting Address 7098 BONITA DRIVE MIAM! BEACH, FL 33141					T 1878 188 TER DER SER		187 (1880) (1870) (1878)	
D	O NOT WRITE	03242004 No Chg-P CR2E034 (10/03) 4. FEI Number						
	6. Name and Address of Current Re							
HERRERA, BENJAMIN 1131 SORRENTO DRIVE FT. LAUDERDALE, FL 33326			DO NOT WRITE IN THIS SPACE					
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 accelete obligations of registered agent. SIGNATURE O5 - O3 - O4								
SIGNATURE Signature, typed or printed hame of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.				.00 May Be led to Fees				
10.	OFFICERS AND D	RECTORS	1		· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS CITY-ST-ZIP	PD HERRERA, BENJAMIN 1131 SORRENTO DRIVE FT. LAUDERDALE, FL 33326				U000001 05/07/04-8	158150 30010-00	163.75	
HITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HERRERA, MARIA G 1131 SORRENTO DRIVE FT. LAUDERDALE, FL 33326			DO	NOT W	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SP	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				:				
TITLE	1		ı					

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

"Pure duit 1 05 - 03 - 04 (954) 349 - 2593

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-03-04 (954) 349-2593