

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90777 009 ***150.00

DOCUMENT # P95000043098

1. Entity Name

HERR ENGINEERING CORPORATION



Principal Place of Business
1431 CHAFFEE DRIVE STE 3
TITUSVILLE FL 32780

Mailing Address
1431 CHAFFEE DRIVE STE 3
TITUSVILLE FL 32780

2. Principal Place of Business

933 BEVILLE ROAD

3. Mailing Address

933 BEVILLE ROAD

Suite, Apt. #, etc.

STE # 103-K

Suite, Apt. #, etc.

STE # 103-K

City & State

S. DAYTONA, FL

City & State

S. DAYTONA, FL

Zip

32119

Country

USA

Zip

32119

Country

USA

4. FEI Number

59-3317975

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

HERR, R T

**1431 CHAFFEE DRIVE STE 3
TITUSVILLE FL 32780**

Name

HERR, R.T.

Street Address (P.O. Box Number is Not Acceptable)

933 BEVILLE ROAD, # 103-K

City

S. DAYTONA

FL

Zip Code

32119

7. Name and Address of New Registered Agent

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.

R.T. HERR

(NOTE: Registered Agent signature required when reinstating)

DATE

3-7-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST HERR, R T 1431 CHAFFEE DRIVE STE 3 TITUSVILLE FL 32780	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERR, R T 1431 CHAFFEE DRIVE STE 3 TITUSVILLE FL 32780	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST HERR, R.T. 933 BEVILLE ROAD, STE 103-K SOUTH DAYTONA, FL. 32119	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERR, R.T. 933 BEVILLE ROAD, STE 103-K SOUTH DAYTONA, FL. 32119	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE REQUIRED HERR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-7-03

(386) 761-4447

CR2E034 (10/02)