FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996		DIVISION OF CORPORATIONS					
DOCU 1. Corporation	MENT # P	95000075	527 (8	B)				
HERF	RAN Y HERMANOS	, INC.		-				
]	Billi Ba lli ab ill i bbo : Dill	I e nde han tart fart
Principal Plac	e of Business	Mailing A	ddress					
13800 SOU SUITE 418 MIAMI FL 3	THWEST 8TH STREET 33184	SUITE	13800 SOUTHWEST 8TH STREET SUITE 418 MIAMI FL 33184			3. Date Incorporated or Ourlified 10/02/1995	3a. Date of Las	st Report
2. Principal P	lace of Business	2a. Mailin	g Address		• · · · · · · · · · · · · · · · · · · ·	4. FET Number		Applied For
Suite, Apt.	# ato	26				65-0624911	_	Not Analia III
22 Suite, Apt.	#, etc.	27 Suite,	Apt. #, etc.			5. Certificate of Status Desired	1 1	75 Additional ee Required
City & State	е	City &	State			6. Election Campaign Financing		.00 May Be
23		28				Trust Fund Contribution		ided to Fees
Zip	Country	Zip		Countr	у	8. This corporation has liability for	rintar _{ii} ble tax unde	
24	25 Name and Address	29 s of Current Registered #		[30]		Florida Statutes X Ye 10. Name and Address of New	s [No	
1201 H	Pration Service Co Ays Street Hassee FL 32301-252			83 83		Address (P.O. Box Number is Not Accepta		
11. Pursuant t	to the provisions of Section	ns 607 0502 and 607 1509	Florido Statut	i				Zip Code
or register	ed agent, or both, in the S	State of Florida. Such change ons of, Section 607.0505, F	e was authorize	es, the above- ed by the con	named co oral on s l	rporation submits this statement for the publicand of directors. I hereby accept the app	rpose of changing it pointment as register	ts registered office red agent. Lanı
SIGNATURE	and docopt the obligation	ons or, oscilon bor.0303, F	onda Statutes	i.			~	· ·
		registered agent and title it applicable	(NC)	H. Registered Age	nt Signature re	oporant who remembers up.	DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF		TORS IN 12	
TITLE	PSTD DELFTE		1. 1 7 I LE			Chang		
NAME COREE ADDRESS	HERRAN, ALBERTO J			1.2 NAME				
STREET ADDRESS	1000 000 INTEG ON CITELI, \$410			13 STHEE	ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL 33184			1.4 C/TY-1	SI-ZiP		·	···
NAME		Ļ	J occur	2 1 7171.			☐ Chang	e
STREET ADDRESS				2.2 NAME	ADDDECC			
CITY-ST-ZIP				23 STREE				
TITLE			DELETE	3. 1 TITLE	5' - Z'Ir'		Change	· [7] Addition
NAME		_		3.2 NAME			L1 cliange	e 🔲 Addition
STREET ADDRESS				3.3 STREE	ADDRESS			
CITY-ST-ZiP				3.4 CHY-5	T- ZIP			
TITLE			DELETE	4 1 THTLE			Change	Addition
IAME				4.2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
DITY-ST-ZIP				4.4 CITY - S	1 - 21F			
TILF) DELETE	5 1 TITLE			☐ Change	Addition
IAME .				5.0 NAME				1

6.4 C/TY-ST-Z/P 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida Statutes, I further certify that the information indicated an this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the correctation or the receiver or trustne empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 if chapter 607 an anatominent with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST ZIP

6 1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-2IP

CHTY-ST-ZIP

TITLE

NAME

INTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

1-17-96 (305)226-0882

Change

Add tion