FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STAT

FILED

Jan 30 1998 8:00am

Secretary of State

Candra D Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000079775 (9)

H.H. HERZOG CONSULTING, INC.

Principal Plac	e of Business	M	ailing Address				,
11440 NOF		440 NORTH WEST 30TH STREET					
CORAL SPRINGS FL 33065			CORAL SPRINGS FL 33065				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							10/16/1995
2 Principal P	lace of Business	28.	Mailing Address				4. FEI Number Applied For
21			26				65-0614469 Not Applicable
Suite, Apt.	#, etc.	- 1	Suite, Apt. #, etc.				S8.75 Additional
22		27	27				5. Certificate of Status Desired Fee Required
City & Stat	e		City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution
Zip	Country		Zip	\vdash	untry	<i>'</i>	8. This corporation owes or has paid the current year intangible
24	25	29		30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Regis	tered Agent		81	Name	10. Name and Address of New Registered Agent
HERZOG, HARRIET					01	Name	
11440 NORTH WEST 30TH STRE			Γ			Street Addr	ress (P.O. Box Number is Not Acceptable)
(CORAL SPRINGS FL 33065				-		
					83		
					84	City	FL 85 Zip Code
D	to the sea delegant (Seathern 607.0	EOO and G	07 1509 Elerido Stati	too the	how	n pamed core	
office or i	egistered agent, or both, in the Sta	ate of Florid	da. Such change was	authorize	ed by	the corporat	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
agent. La	im familiar with, and accept the obl	ligations of	, Section 607.0505, F	lorida Sta	atutes	S.	
SIGNATURE	Stonature, typed or printed name of registered	anent and title	if applicable (NC	TF: Benisten	ed And	ont signature requir	red when reinstating) DATE
12.	OFFICERS A			13.		on alguatare rages	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE		TITLE		Change Addition
NAME	HERZOG, HOWARD H			1.21	NAME		
STREET ADDRESS	11440 NORTH WEST 30T	H STREE	Ŧ	1.3 5	STREET	ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 330			1.4 (CITY-S	ST-ZIP	
TITLE	D		DELETE		ΓΠLE		Change Addition
NAME	HERZOG, HARRIET			2.21	NAME		
STREET ADDRESS	11440 NORTH WEST 30T	H STREE	Ŧ	2.3 9	STREET	ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 3300	65		2.4	ÇITY-S	ST-ZIP	
TITLE			DELETE	: 3.1	TITLE		Change Addition
NAME				3.21	VAME		
STREET ADDRESS				3.3 5	STREET	ADDRESS	
CITY - S7 - ZIP				3.4.	CITY-S	ST-ZIP	
TITLE	- 36-38		DELETE	4.17	TITLE		Change Addition
NAME				4. 2	NAME	1	
STREET ADDRESS				4.3 9	STREET	ADDRESS	
CITY-ST-Z#P				4.4.0	OTY-S	ST-ZIP	
TITLE			DELETE	5.1	TITLE		☐ Change ☐ Addition
NAME				5.21	NAME		
STREET ADDRESS				5.3 9	STREET	ADDRESS	
CITY-ST-ZIP				5.4 (OTY-S	ST-ZIP	
TITLE			☐ DELETE	6.1	TITLE		Change Addition
NAME				6.21	VAME		

6.3 STREET ADDRESS

1/16/92

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or or an attachment with an audicess.