

**DOCUMENT # P96000000930**

1. Entity Name

**LYNNE HERMAN INTERIORS, INCORPORATED**

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Principal Place of Business	Mailing Address
20161 PALM ISLAND DRIVE BOCA RATON FL 33498	20161 PALM ISLAND DRIVE BOCA RATON FL 33498-4513

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent	
LYNNE, HERMAN 20161 PALM ISLAND DRIVE BOCA RATON FL 33498	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	City	FL

<p>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/></p>	<p align="center"><b>FILE NOW!!! FEE IS \$150.00</b>  <b>After MAY 1, 2000 Fee will be \$550.00</b>  <b>Make Check Payable to Department of State</b></p>	<p>10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees</p>
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** X *Spence Herman* 1/10/00 (561) 883-0070  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #