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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000012989 (5)

GLEN HERMAN ENTERPRISES, INC.

Principal Place of Business	Mailing Address		
45 N.W. 79TH STREET	45 N.W. 79TH STREET		
MIAM! FL 33150	MIAMI FL 33150		

## **FILED** May 06 1998 8:00am Secretary of State



[							
Principal Plac	e of Business	Mailing Address				1 199(199) (19 (911) 911) 95(1) 95(1) 95(1) 1910 (1910 (910) (910) (910)	
45 N.W. 79TH STREET 45 N.W. 79TH STREET							
MIAMI FL 331	150	MIAMI FL 33150				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
•						02/12/1996	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				65-0644832 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional		
27					Fee Required		
City & Stat	City & State City & State					6. Election Campaign Financing \$5.00 May Be	
23	Country	28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	30	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	25 9. Name and Address of Currer	29 nt Registered Agent	30	Ι		10. Name and Address of New Registered Agent	
BU	IHRMASTER, RICHARD G.			81	Name		
	NW 79 ST			20	Ctrant	Address (D.O. Davids and Address in Not Address in	
	AMI FL 33150			82 Street Address (P.O. Box Number is Not Acceptable)			
}				83			
				84	City	85 Zip Code	
				Ш			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
12,	Signature typed or printed name of registered ago	est and title if applicable (NC D DIRECTORS	III : Registere	d Age	int signature	re required when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD OFFICE NO AIN	DELETE	1.1 19	1LE		Change Addition	
NAME	BUHRMASTER, RICHARD G		1.2 N				
STREET ADDRESS	% 45 N.W. 79TH ST.		1.3 \$	TREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL			ITY-S	i i		
TITLE	\$D	DELETE	2.1 1	1LE		☐ Change ☐ Addition ☐	
NAME	WARDLOW, CLIFFORD H		2.2 N	AME			
STREET ADDRESS	% 45 N.W. 79TH ST.		2.3 S	TREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.40	HTY - 5	ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TI			Change Addition	
NAME	PEREZ, ERNESTO		3.2 N			1	
STREET ADDRESS	45 NW 79 ST				ADDRESS		
CITY-ST-ZIP	MIAMI FL	DELETE	3.4. C 4.1 TI		ST-ZIP	Change Addition	
TITLE		ןן טנגנונ	4.1 II 4. 2 N		Ì	Change Addition	
NAME STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			4.3 S 4.4 C				
TITLE	-	☐ DELETE	5.1 Th		1-211	Change Addition	
NAME		<del>-</del>	5.2 N		-		
STREET ADDRESS			1		ADDRESS	1	
CITY-ST-ZIP			5.4 C			1	
TITLE		☐ DELETE	6.1 TI			Change Addition	
NAME			6.2 N	AME			
STREET ADDRESS			6.3 S	TREET	ADDRESS	1	
CITY-ST-ZIP			6.4 C				
44 I harabu	parties that the information amplicatus	ith this filing door not aualifu	for the ow	omo	lion etato	ted 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 corpyration 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 chapter 6, or on an attact mant with an address