


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000008145

1. Entity Name
E. HERRAN FAMILY CORPORATION



Principal Place of Business
**14020 S.W. 36 STREET
MIAMI, FL 33175**

Mailing Address
**14020 S.W. 36 STREET
MIAMI, FL 33175**



02092005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0727537

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MIAMI CORPORATE SYSTEMS, INC.
283 CATALONIA AVE
2ND FLOOR
CORAL GABLES, FL 33134**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000226836
02/12/05 80838 020 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HERRAN, EZEQUIEL
STREET ADDRESS	14020 S.W. 36 STREET
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	D
NAME	HERRAN, NANCY
STREET ADDRESS	14020 S.W. 36 STREET
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	D
NAME	HERRAN, VIVIAN
STREET ADDRESS	14020 S.W. 36 STREET
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	D
NAME	HERRAN, JAVIER
STREET ADDRESS	14020 S.W. 36 STREET
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: EZEQUIEL HERRAN FEB-9-05 305-559-3731
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #