


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2007 08:00 A
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
--------------------------------------------------------------------------------	--------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



02192007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0727537	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
-------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------

10. OFFICERS AND DIRECTORS

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

**DO NOT WRITE
IN THIS SPACE**

U000000644912
03/02/07-80058-021 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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* 2-20-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #