

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000008286

1. Entity Name
HEYS INVESTMENT, INC.



FILED
Sep 15, 2008 08:00 AM
Secretary of State

Principal Place of Business
8455 GRAND CANAL DRIVE
MIAMI, FL 33144

Mailing Address
8455 GRAND CANAL DRIVE
MIAMI, FL 33144



08262008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0725433

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
SUITE 700
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

U000000959780
09/15/08-80005-009 150.00
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HERRAN, JOSE ANTONIO
STREET ADDRESS	8455 GRAND CANAL DRIVE
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	D
NAME	HERRAN, MARIA
STREET ADDRESS	8455 GRAND CANAL DRIVE
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	D
NAME	HERRAN, ANA MARY
STREET ADDRESS	8455 GRAND CANAL DRIVE
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	D
NAME	HERRAN, DANIEL
STREET ADDRESS	8455 GRAND CANAL DRIVE
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	D
NAME	HERRAN, JOSE A
STREET ADDRESS	8445 GRAND CANAL DRIVE
CITY-ST-ZIP	MIAMI, FL 33134
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-28-08

Date

Daytime Phone #