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

**PROFIT CORPORATION ANNUAL REPORT** 

1998

Sulte, Apt. #, etc.

City & State

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Zip



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000064012 (2)

Country

Name and Address of Current Registered Agent

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AMERILAWYER CHARTERED 343 ALMERIA AVENUE

CORAL GABLES FL 33134

HERBERT SERVICES. INC.

2935 BUTTONBUSH COURT Palm Harbor FL 34684
2a. Mailing Address
-

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Suite, Apt. #, etc.

City & State

Zip

3. Date Incorporated or Qualified <u>07/24/1997</u> Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes

10. Name and Address of New Registered Agent Yes

**FILED** 

May 12 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Country

B2

84

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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	PRUCE HERRENT of Luck	J	11189%	
	Stonature, typod or printed name of registered agent and title if applicable (NOTE:	Registered Agent signature	required whon reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DELETE	1.1 TITLE	Change Addition	
NAME ·	HERBERT, BRUCE E	1.2 NAME		
STREET ADDRESS	2935 BUTTONBUSH COURT	1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL 34684	1.4 CITY - ST - ZIP		
TITLE	STD DELETE	2.1 TITLE	Change Addition	
NAME	HERBERT, MARCIA A	2.2 NAME		
STREET ADDRESS	2935 BUTTONBUSH COURT	2.3 STREET ADDRESS		
CITY+ST-ZIP	PALM HARBOR FL 34684	2 4 CITY - ST - ZIP		
TITLE	DELETE	3.1 THILE	Change Addition	
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition	
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE	Change Addition	
NAME	•	5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE	Change Addition	
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - ZIP		

14. Thereby 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 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 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 12 or Block 13 if chapter 50.

4/16/98