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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9800033814

## FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90132 014 \*\*\*150.00

1. Corporatio	on Name	000017			
H.E.R.C.	INC.				`
111-27/11-01	,				L JERUSERI DIA SOLOS SOCIA ARBIS DRIVI DRIVI DRIVO ASIAR NURI IRIAN MANA DINTU LOCA
Principal Place of Business Mailing Address					I ISBNIBE HE IBLE HENT BRUT BEIN BRUT GRIBE HIGH HIBH HERE HEN HER HEN
1165 CORAL CLUB DRIVE 1165 CORAL CLUB DRIVE					
CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071					
	,				DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					04/10/1998 4. FEI Number Applied For
Principal Place of Business     2a. Malling Address				65-0831323 Not Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional
22 27					5. Certificate of Status Desired Fee Required
City & State City & State			<u> </u>		6. Election Campaign Financing \$5.00 May Be
23		28	94 (J. J. 1		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax.
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered Agent
LIER	HEV CRECORY C		Ì	81 Name	
HENLEY, GREGORY C 1165 CORAL CLUB DRIVE				82 Street A	ddress (P.O. Box Number is Not Acceptable)
CORAL SPRINGS FL 33071			1		
	TAL SI NINGO I E SOUI I			83	
1.37 J			<u> </u>	84 City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.050.	2 and 607,1508, Florida Sta	tutes, the ab	ove-named c	corporation submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was	s authorized	by the corpor	ration's board of directors. I hereby accept the appointment as registered.
SIGNATURE	•	And the second second	OFF: Desistand	Anna donatura est	quired when reinstating) DATE
12.	Signature, typed or printed name of registered ager	ID DIRECTORS	13.	Agent alguatore rev	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	<del></del>	DELETE	1,1 707	,E	☐ Change ☐ Addition
NAME	HENLEY, GREGORY C	. 3 4 6.76	1.2 NA	we ]	
STREET ADDRESS	ALAC AADAL ALLID DONE		1.3 ST	REET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1,4 CIT	Y-ST-ZIP	
TITLE		☐ DELETE	2.1 TIT	£	Change Addition
NAME			2.2 NA	ME	
STREET ADDRESS			2.3 ST	REET ADDRESS	
CITY-ST-ZIP			2. 4 CF	Y-ST-ZIP	
TITLE		☐ DELETE	3.1 TT	LE	☐ Change ☐ Addition
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STREET ADDRESS	s) ·		3.3 STI	REET ADDRESS	
CITY-ST-ZIP	<u> </u>			Y-ST-ZIP	
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STREET ADDRESS			4.3 ST	REET ADDRESS	
CITY-ST-ZIP	<u> </u>			Y-ST-ZIP	Change Addition
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NAME			5.2 NA	1	
STREET ADDRESS	·			REET ADDRESS	_
CTY-ST-ZIP	1	☐ DELETE	6.1 TIT	Y-ST-ZIP	Change Addition
TITLE	1 .		6.1 M	- 1	
NAME	<b>.</b>				
STREET ADDRESS				SEET VUUDEGG	ı
CITY-ST-ZIP				REET ADDRESS Y-ST-ZIP	

14. I hereby 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 of 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 changed or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/99 (954)346-8090 Date Dayline Phone # CR2F034 (11/98)