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PROFIT * CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S12294

ROBERT HERRERO, JR. AND ASSOCIATES, INC.

						 	ISI MINII NINII ISON
Principal Place	e of Business	Mailing Address					
7251 W PAI ME	TTO PARK ROAD	7251 W PALMETTO PARK RO	DAD				
SUITE 203 SUITE 203							
BOCA RATON FL 33433 BOCA RATON FL 33433					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
•					10/25/1990		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0235823		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	•	5 Additional
22	3	27			3. 3. 3. 3. 3. 3. 3. 3.	Fee	Required
City & Stat	te	City & State			6. Election Campaign Financing		00 May Be
23		28			Trust Fund Contribution	Adde	ed to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year		_
24	25	29 3	30		Personal Property Tax.	√as	□No
,	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	red Agent	
	The state of the s	N.	81	Name	•	_	
HER	RRERO, ROBERT JR.	And the second state of the second	82	Ct-nt Add	ress (P.O. Box Number is Not Acceptable)	 	
725	1 W PALMETTO PARK RD	Freeze St. Care	62	Street Addi	ess (P.O. Box Number is Not Acceptable)	Granden e varian	9
SUT	TE 203		83	,		1111111111	5. 编作图题
BOC	CA RATON FL 33433				· · · · · · · · · · · · · · · · · · ·		ge Bie de Bie las
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Appearance to prope	<u> </u>			L	oration submits this statement for the purpos	o of changing	ite registered
			d - C4 - 4 - 4 - 6 -		on's board of directors. I hereby accept the a		
SIGNATURE	am familiar with, and accept the oblig	ations of, Section 607.0505, Florid	da Statutes	,			
SIGNATURE	am familiar with, and accept the oblig	ent and title if applicable. (NOTE: F	da Statutes Registered Agen	,	d when reinstating). DAT	E	· · · · · · · · · · · · · · · · · · ·
signature 12.	am familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	ations of, Section 607.0505, Florid ent and title if applicable. (NOTE: F ND DIRECTORS	Registered Agen	,	od when reinstailing) DAT ADDITIONS/CHANGES TO OFFICER	E	TORS IN 12
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6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90015 022 ***150.00

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 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 changed, or on an attachment with an address, with all other like empowered.