

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S28735

FILED  
Dec 23, 2008  
Secretary of State

Entity Name: HERMAN INVESTMENTS, INC.

**Current Principal Place of Business:**

1542 NE QUAYSIDE TERRACE  
MIAMI, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

1542 NE QUAYSIDE TERRACE  
MIAMI, FL 33138 US

**New Mailing Address:**

FEI Number: 65-0271862

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRIEDMAN, MICHAEL DEAN  
65625 MIAMI LAKES DR  
STE316  
HIALEAH, FL 33014 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: MICHAEL DEAN FRIEDMAN

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: HERMAN, PAUL,  
Address: 1542 NE QUAYSIDE TERRACE  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: HERMAN, SUSAN,  
Address: 1542 NE QUAYSIDE TERRACE  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: REYNOLDS, LAURIE  
Address: 16855 NE 2ND AVE 302B  
City-St-Zip: N. MIAMI BEACH, FL 33162

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURIE REYNOLDS

VP

12/23/2008

Electronic Signature of Signing Officer or Director

Date