

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 JAN 24 PM 2:28

DOCUMENT # V07084 (9)

1. Corporation Name
KEVIN HERRING, INC.

Principal Place of Business P.O. BOX 291915 DAVE FL 33329	Mailing Address P.O. BOX 291915 DAVE FL 33329
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25

3. Date Incorporated or Qualified 01/15/1992	3a. Date of Last Report 04/06/1994
4. FEI Number 65-0308089	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

**HERRING, KEVIN
14620 SW RIVER DRIVE
MIAMI FL 33167**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	4013 SW 14 Street
83	
84 City	Fort Laud., FL
85 Zip Code	33317

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	HERRING, KEVIN	1.1 TITLE PDST	☒ Change ☐ Addition
NAME HERRING, KEVIN		1.2 NAME Herring, Kevin	
STREET ADDRESS 14620 SW RIVER DRIVE		1.3 STREET ADDRESS 4013 SW 14th Street	
CITY- ST- ZIP MIAMI- FL		1.4 CITY- ST- ZIP Fort Laud., FL 33317	
TITLE ST	HERRING, KEVIN	2.1 TITLE	☐ Change ☐ Addition
NAME HERRING, KEVIN		2.2 NAME	
STREET ADDRESS 14620 SW RIVER DRIVE		2.3 STREET ADDRESS	
CITY- ST- ZIP MIAMI- FL		2.4 CITY- ST- ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE: Kevin Herring Jan 12, 1995 (705) 797-9797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Expiration Period