ANN	PROFIT RPORATION UAL REPORT 1996		Sandra Secre	ARTMENT OF STA a B. Mortham stary of State F CORPORATION:	_		
DOCU 1. Corporati	MENT #	V08120	(0)				
HER-0	IX ENTERPRIS	ES, INC.	()				
Principal Plac	ce of Business	Mai	ling Address				
5891 CYPRE NAPLES FL	SS HOLLOW WAY 33942		91 CYPRESS HOLLO PLES FL 33942	W WAY			
2 Principal I	Place of D'-					 Date Incorporated or Qualifie 01/20/1992 	ed 3a. Date of Last Report 08/21/1995
21	Place of Business	2a. 1 26	Mailing Address			4. FEI Number 65-0314516	Applied For Not Applicable
Suite, Apt	#, etc	27	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & Sta	le	(City & State			6. Election Campaign Financing	Fee Required \$5.00 May Be
Z ip	Co	28 puntry 2	Zıp	Country		Trust Fund Contribution	Added to Fees for intangible tax under s 199 032,
24	9. Name and A	29 Idress of Current Registe	red Asent	30		Florida Statutes	Yes No
Di	KON, JAMES	- Control of the cont	red Agent	81 N	lame	10. Name and Address of New	Registered Agent
58	91 Cypress Hol	LOW WAY		82 S	treet Addro	oss (P.O. Box Number is Not Accept	lable)
N/	IPLES FL 33942			83			
				84 C			
				(64) U	ity		85 Zip Code
11. Pursuant	to the provisions of S	Sections 607,0502 and 607	1508, Florida Statu		·	ration submits this statement for the	FL 85 Zip Code
11. Pursuant office or ragent Ta	to the provisions of segistered agent, or to m familiar with, and	Sections 607.0502 and 607 poth, in the State of Florida accept the obligations of, S	1508, Florida Statu Such change was a Section 607.0505, Fl	tes, the above har	·	ration submits this statement for the n's board of directors. Thereby acce	FL
agent I a	m familiar with, and	Sections 607,0502 and 607 both, in the State of Florida accept the obligations of, S	Section 607.0505, FI	tes, the above-nar authorized by the orida Statutes.	med corpo corporation	ins board or directors. Thereby acce	purpose of changing its registered ept the appointment as registered
agent I a SIGNATURE 12.	m familiar with, and	accept the obligations of, S	Section 607.0505, FI pps:abc INO ORS	les, the above has authorized by the orida Statutes. ITE Registered Agents of 13.	med corpo corporation	d when rensating)	purpose of changing its registered ept the appointment as registered
agent I a	m familiar with, and Signature typed or printed	accept the obligations of, S name of a gistered agent and lice if a OFFICERS AND DIRECT	Section 607.0505, FI	les, the above-nal authorized by the orida Statutes. IE Registered Agents (med corpo corporation	d when rensating)	purpose of changing its registered ept the appointment as registered
agent I a SIGNATURE 12. TITLE	Francisco (Signature tysied or purhed) PHERMAN, DON 3115 GULF SH	accept the obligations of, S name of registeric agent and lice if a OFFICERS AND DIRECT IALD IORE BLVD #PH7	Section 607.0505, FI pps:abc INO ORS	les, the above has authorized by the orida Statutes. ITE Registered Agents of 13.	med corpo corporation grature requires	d when rensating)	purpose of changing its registered ept the appointment as registered
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