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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Feb 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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appears in Block 12 or Block 13 if o

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(4)

HERITY INTERNATIONAL CORPORATION

Principal Place of Business Mailing Address 3278 WESTMINSTER DRIVE 3278 WESTMINSTER DRIVE BOCA RATON FL 33496-2522 **BOCA RATON FL 33496** 3. Date Incorporated or Qualified 3a. Date of Last Report 06/12/1996 08/04/1992 4, FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0350963 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Žφ Country This corporation has liability for intangible tax under s. 199.032, Country Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name KRANGLE, ELLIOT 3278 WESTMINSTER DR Street Address (P.O. Box Number is Not Acceptable) 82 **BOCA RATON FL 33496** В3 City Zip Code 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 Signature, hypotholy proced native of registered agont and the if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition DELETE PSTD 1.1 TITLE TITLE KRANGLE, ELLIOT NAME 1.2 NAME 3278 WESTMINSTER DRIVE 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33496** 1.4 CITY-ST-ZIP City-St-ZiP Change ■ Addition □ DELETE 2.1 TITLE THILE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE THLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CDY-SI-ZIE Change Addition DELETE 4.1 TITLE THLE 4. 2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY-ST-Z-P Change Addition DELETE 5.1 TITLE TILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHTY - ST - 7F Change Addition DELETE 6.1 TITLE HiltE NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS

64 CITY-ST-ZIP

14. I do nereby 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 of the

an attachment with an address