

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

APPROVED
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97 FEB -7 AM 9:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 321930 (0)
1. Corporation Name
FERRO LEASING CORPORATION

Principal Place of Business

SUITE 1805
11111 BISCAYNE BLVD
MIAMI FL 33181-3404

Mailing Address

SUITE 1805
11111 BISCAYNE BLVD
MIAMI FL 33181-3404

3. Date Incorporated or Qualified
10/13/1967

3a. Date of Last Report
03/13/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

59-1196294

Applied For
Not Applicable

6. 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

FEUERRING, RALPH R
687 OCEAN BLVD
GOLDEN BEACH FL 33160

10. Name and Address of New Registered Agent

81 Name

FEUERRING, RALPH R.

82 Street Address (P.O. Box Number is Not Acceptable)

11111 BISCAYNE BLVD

83

84 City

MIAMI

FL

85 Zip Code

33181

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 typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
FEUERRING, RALPH
687 OCEAN BLVD
GOLDEN BEACH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ASD
FEUERRING, MARLENE
263 OLIVER'S COVE LANE
WATERMILL NY 11976

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FEUERRING, GERTRUD
55 CENTRAL PARK WEST
NEW YORK NEW YORK 10023

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
HILL, NICOLE
6 HAMPTON ROAD
PURCHASE NY

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

11111 BISCAYNE BLVD
MIAMI, FL 33181

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RALPH R. FEUERRING

February 3, 97

Date

305-895 2240

Daytime Phone #

CR2E034 (9/96)