

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 385814

(9)

1. Corporation Name

FERHIL, INC.



Principal Place of Business

39-12 S. OCEAN BLVD.
#1405
HIGHLAND BEACH FL 33487

Mailing Address

39-12 S. OCEAN BLVD.
#1405
HIGHLAND BEACH FL 33487

2. Principal Place of Business

2a. Mailing Address

21 Highland Beach

26 Suite, Apt. #, etc.

22 # 1405

27 Suite, Apt. #, etc.

23 City & State

27 City & State

23 Highland Beach, Florida

27 City & State

24 33487

29 Zip

30 Country

9. Name and Address of Current Registered Agent

PARDO, GUSTAVO
2966 GENOA WAY
DELRAY BEACH FL 33445

3. Date Incorporated or Qualified

07/26/1971

3a. Date of Last Report

03/15/1995

4. FET Number

59-1709652

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. 199.092,
Florida Statutes

Yes ☐ No ☒

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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 607.0503, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of Registered Agent or Director

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME: P
PARDON, FERNANDO M
STREET ADDRESS: 3912 SOUTH OCEAN BLVD.
CITY, ST, ZIP: HIGHLAND BEACH FL
2. TITLE
NAME: S
PARDO, HILDA H
STREET ADDRESS: 3912 SOUTH OCEAN BLVD.
CITY, ST, ZIP: HIGHLAND BEACH FL
3. TITLE
NAME: D
LAVALLE, L L
STREET ADDRESS: 2600 N MILITARY TRAIL
CITY, ST, ZIP: BOCA RATON FL
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 it 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 or both on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 18, 1.996 Tel 2748589

CR2E034 (12/95)