

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90005 014 ***150.00

DOCUMENT # F01000003896

1. Entity Name

F-T-B INTERNATIONAL CORP.



Principal Place of Business

26 BROADWAY - SUITE 900
NEW YORK NY 10004-1896

Mailing Address

26 BROADWAY - SUITE 900
NEW YORK NY 10004-1896

54066487



MOORE

CR2E034 (4/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-2788450

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD., SUITE 508
MIAMI FL 33156

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME BUTLER, THOMAS
STREET ADDRESS 26 BROADWAY - SUITE 900
CITY-ST-ZIP NEW YORK NY 10004-1896

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME VERZONI, RENATO
STREET ADDRESS 26 BROADWAY - SUITE 900
CITY-ST-ZIP NEW YORK NY 10004-1896

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME PISANO, MARIA
STREET ADDRESS 26 BROADWAY - SUITE 900
CITY-ST-ZIP NEW YORK NY 10004-1896

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CD ☐ Delete
NAME BRANDONE, FERNANDA T
STREET ADDRESS C/O TRANSPORT SRL, CORSO SEMPIONE 75
CITY-ST-ZIP MILAN, ITALY 20145

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Maria Pisano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727-2604 212-514-5400

Date

Daytime Phone #