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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90138 037 ***150.00

DOCU	MENT # G1367	5					
1. Corporatio	n Name FERRERA'S INTERNATION						
GOT EA		AL DEGIGINO, INO			i LOOTIUK BOOK KIBED KING BIKKI 1908 CKK BUDKI BIR	ı Aldı birli A	ITEL ELEK LEEK
Principal Plac	e of Business	Mailing Address			_		•
406 VIA DE PA	LMAS	406 VIA DE PALMAS Suite 83					
SUITE 83 BOCA RATON FL 33426		BOCA RATON FL 33426			DO NOT WRITE IN THIS SPACE		
		_			3. Date Incorporated or Qualifed	•	
	where I am I have an one				12/16/1982		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	_ 	plied For
21		26			59-2230588		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
22 City & Stat		City & State			A Flating Compaign Financing	\$5.00	
一 ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	e	28 28			6. Election Campaign Financing Trust Fund Contribution	Added t	
23 Zip	Country Zip				This corporation owes the current year Intan		
24	[25]	29 30	Country		·		□No
<u> </u>	9. Name and Address of Curre				10. Name and Address of New Registered Ag	gent	
			81	Name			
	ERRERA, GUY		82	Street A	Address (P.O. Box Number is Not Acceptable)	_	
83 ROYAL PALM PLAZA					Address (1.0. box Humber to Not Not plants)		
BOC	A RATON FL 33432		83				
			84	City		85 Zip (Code
				•	FL	L	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes, of Florida, Such change was auth	the above orized by t	-named of the corpo	corporation submits this statement for the purpose of characteristics board of directors. I hereby accept the appoint	ianging its nent as reg	registered gistered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florida	a Statutes.				
SIGNATURE					equired when reinstating) DATE		
12.	Signature, typed or printed name of registered ag	ND DIRECTORS	13.	signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	VSD	DELETE	1.1 TITLE		, , ,	Change	Addition
NAME	LAFERRERA, GAETANO		1.2 NAME		1 0 0 0		
STREET ADDRESS			1.3 STREET	ADDRESS	F3 ROYAL VALM PLAZA		
CITY-ST-ZIP			1.4 CITY-ST	-ZIP	BOCA RATIS FC 33452		
TITLE	PD	☐ DELETE 2.11			BOCA RAPSI FL 33452 BOCA RAPSI FL 33452 BOCA RAPSI FL 33452	Change	☐ Addition
NAME	· ·		2.2 NAME		De die Orian l. 120		1
STREET ADDRESS	799 E PALMETTO PK RD		2.3 STREET	ADDRESS	73 NOVAL (701 107)		
CITY-ST-ZIP	222-1111		2. 4 CITY-S	r-zip 🕇	BOCA (ADD) 12 33430	=	
TITLE	☐ DELETE 3.1T		3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS	•		
CITY-ST-ZIP			3.4. CITY+S	T- ZJP		Change	Addition
TITLE		☐ DELETE	4.1 TITLE	ľ			L Roomon
NAME			4. 2 NAME		.•		
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP			4.4 CITY-ST 5.1 TITLE	-287		Change	Addition
NAME			5.2 NAME			- 7	_
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S1	- ZIP			
TITLE	, , , , , , , , , , , , , , , , , , , ,	☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME	Ì			
STREET ADDRESS			6.3 STREET	ADDRESS			

6.4 CITY-ST-ZIP 14. 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 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, with all other like empowered.

SIGNATURE: 🗸