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

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

**FILED** May 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** G98519 (3)FERWIN ADVERTISING INCORPORATED Principal Place of Business Mailing Address C/O MANUEL FERNANDEZ C/O MANUEL FERNANDEZ 1131 N.E. 91ST TERRACE 1131 N.E. 91ST TERRACE MIAMI SHORES FL 33138-3403 DO NOT WRITE IN THIS SPACE MIAMI SHORES FL 33138-3403 3. Date Incorporated or Qualified 02/15/1984 2. Principal Place of Business 2a. Mailing Address Applied For 59-2374882 21 26 Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible ☐ No 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERNANDEZ, MANUEL 1131 N.E. 91ST TERRACE Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI SHORES FL 33138 83 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 Signatura, typed or printed name of registered agent and tale if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change \_\_\_ Addition TITLE FERNANDEZ, MANUEL NAME 1 2 NAME 1131 N.E. 91ST TERR. STREET ADDRESS 1.3 STREET ADDRESS MIAMI SHORES FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition 2.1 TITLE TITLE NAME FERNANDEZ, MARIA C. 22 NAME 1131 N.E. 91ST TERR. STREET ADDRESS 2.3 STREET ADDRESS **MIAMI SHORES FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TIFLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME

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 grounged, or on an attactment with an address.

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

**53 STREET ADDRESS** 

6.3 STREET ADDRESS 64 CITY-ST-ZIP

5 4 CITY - ST- ZIP

5.1 TITLE

5.2 NAME

61 TIDE

6.2 NAME

Addition

Addition

Change

Change

DELETE

DELETE

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