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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L82912

FEROB	CORPORATION						
	, •					i:	
			•				
Principal Place of Business Mailing Address							
845 5TH STREET 845 5TH STREET						•	
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139				DO NOT WRITE I	N THIS SPACE		
					3. Date Incorporated or Qualifed		
					06/26/1990		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
		26	-		65-0201675		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22		27			5. Certificate of Status Desired	Fee Re	equired
City & Stat	ie ·	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	to Fees
Zip	Country	Zip	Country	4	8. This corporation owes the current		
24	25	29	30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curro	ent Registered Agent	81	Name	10. Name and Address of New Regi	stered Agent	
DALI	MA, JORGE M.	•	81	Name	•		
			82	82 Street Address (P.O. Box Number is Not Acceptable)			
845 5TH STREET MIAMI BEACH FL 33139		92	83		er en en en eller gran. Er lætt af tre de lættettettet	277 (1 3 3 5 6 6 5 3 5 6 6 5 5 6 6 5 6 6 6 6 6	
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			84	City		85 Zip (Code'
						<u> FL </u>	
11 Diam.	to the previous of Continue CO7 Of	EDD and EDT 1500 Elected Statute	an tha abou	o nomed so	recretion cubmite this statement for the nur		
 Pursuant office or r 	to the provisions of Sections 607.05 egistered agent, or both, in the Stat	502 and 607.1508, Florida Statute te of Florida. Such change was a	es, the abov uthorized by	e-named cor the corpora	rporation submits this statement for the purp ition's board of directors. I hereby accept th	oose of changing its e appointment as re	gistered
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat im familiar with, and accept the obliging the section of the secti	502 and 607.1508, Florida Statute te of Florida. Such change was a gations of, Section 607.0505, Flor	es, the abov uthorized by rida Statutes	re-named con the corpora s.	rporation submits this statement for the pur tion's board of directors. I hereby accept th	e appointment as re	gistered
11. Pursuant office or r agent. I a SIGNATURE	im familiar with, and accept the oblig	gations of, Section 607.0505, Flor	nda Statutes	5.		to be appointment as re-	gistered
agent. I a	m familiar with, and accept the oblig Signature, typed or printed name of registered as	gations of, Section 607.0505, Flor	nda Statutes	5.	rporation submits this statement for the purition's board of directors. I hereby accept the ired when reinstating). ADDITIONS/CHANGES TO OFFICE	1-22-99 DATE	
agent. I a	m familiar with, and accept the oblig Signature, typed or printed name of registered as	gations of, Section 607.0505, F101 gent and title if applicable. (NOTE:	Registered Age	5.	ired when reinstating) . f . s . s	1-22-99 DATE	
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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.

6.4 CITY-ST-ZIP

6.3 STREET ADORESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 12, 1999 8:00am

Secretary of State

02-12-1999 90020 018 ***150.00