

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L82912

FILED  
Mar 18, 2008  
Secretary of State

Entity Name: FEROB CORPORATION

**Current Principal Place of Business:**

845 5TH STREET  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

845 5TH STREET  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 65-0201675      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PALMA, JORGE M.  
845 5TH STREET  
MIAMI BEACH, FL 33139      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PALMA, ROBERTO,  
Address: 748 N.W. 133RD AVE.  
City-St-Zip: MIAMI, FL

Title: P ( ) Delete  
Name: PALMA, JORGE M.,  
Address: 11760 SW 24 TERRACE  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: PALMA, ADRIAN  
Address: 5333 COLLINS AVE., #408  
City-St-Zip: MIAMI BEACH, FL 33140

Title: T ( ) Delete  
Name: PALMA, RAUL  
Address: 9425 SW 8 TERR  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: PALMA, JORGE A  
Address: 5333 COLLINS AVE #208  
City-St-Zip: MIAMI BEACH, FL 33140

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADRIAN PALMA

V

03/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date