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PROFIT CORPORATION ANNUAL REPORT

. 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M46116 1. Corporation Name

PREFER CORPORATION

			1				
Principal Plac	e of Business	Mailing Address			() ESTORAL (III BIBLO EN BIT (IBST 11010 BIT	. 44864 81811 DIE11 BIGIL BI	871 01011 1001
6187 OVERSEAS HIGHWAY POST OFFICE BOX 510028			3		ļ		•
MARATHON FL 33050 KEY COLONY BEACH FL 330			33051				
US US					DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed	, .	
					02/05/1987	, T. I.	
	lace of Business	2a. Mailing Address		المستهما والمستاد	4. FEI Number	- 1	olied For
21		26			NOT APPLICABLE		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22	·	27		**		Fee Rec	
City & Star	le .	City & State			6. Election Campaign Financing	\$5.00	
		28			Trust Fund Contribution	Added to	rees
Zip	Country	, Zip			8. This corporation owes the current y	ear Intangible	ŮNo
24	25	29	30	1	Personal Property Tax. 10. Name and Address of New Regis		UNO
	9. Name and Address of Current	Kegistered Agent		81 Name	10. Name and Address of New Regis	tereo Agent	
FFR	IA, MANUEL PEREZ	*		Hame	•		
9440 SW 55 ST				82 Street Add	ress (P.O. Box Number is Not Acceptable)]
	MI FL 33165			83		Land Company of Street Company	*
IVIII	WITE 55 165		ŧ	83			
;	•			84 City		85 Zip C	ode
tura e tigati						<u>FL </u>	
office or a	registered agent, or both, in the State o	if Florida. Such change was a	uithorized	d by the comoration	poration submits this statement for the purp on's board of directors. I hereby accept the	ose of changing its i appointment as req	registered iistered
45 agent. La	nm familiar with, and accept the obligati	ons of, Section 607.0505, Flo	rida Stat	utes.	on a board of directors. Thereby decept the	appointmont as rog	
SIGNATURE					•	*	
	Signature, typed or printed name of registered agent			Agent signature require		ATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	PTS -	☐ DELETE	1.1 11	TLE		☐ Change	Addition
NAME	FERIA, MANUEL PEREZ		1.2 N	AME I			1
STREET ADDRESS						ا و الراب - داخور میونیدید	
CITY-ST-ZIP	KEY COLONY BEACH FL		1.3 \$1	TREET ADDRESS		د اما حق ۱۳۵۰ شمیل میشانیسیدند	
TITLE	l D					د یا دو ۱۰۰۰هی میپولیسیدین	
NAME	l = .	☐ DELETE		TREET ADDRESS		Change	Addition
STREET ADDRESS	FERIA, MANUEL PEREZ	☐ DELETE	1.4 CI	TREET ADDRESS ITY-ST-ZIP TLE		Change	Addition
CITY-ST-ZIP	DO DOM 540000 MM	☐ DELETE	1.4 CI 2.1 TI 2.2 N/	TREET ADDRESS ITY-ST-ZIP TLE		Change	Addition
		☐ DELETE	1.4 CI 2.1 TI 2.2 N/ 2.3 ST	TREET ADDRESS TTY-ST-ZIP TLE AME		☐ Change	Addition
TITLE	PO BOX 510028 N/A	☐ DELETE	1.4 CI 2.1 TI 2.2 N/ 2.3 ST	TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP		☐ Change	Addition
	PO BOX 510028 N/A KEY COLONY BEACH FL VD		1.4 CI 2.1 TI 2.2 N/ 2.3 SI 2.4 C	TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TLE		_ ·	
TITLE	PO BOX 510028 N/A KEY COLONY BEACH FL VD FERIA, ADDY PEREZ		1.4 CI 2.1 TI 2.2 N/ 2.3 ST 2.4 C 3.1 TI 3.2 N/	TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TLE		_ ·	
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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

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP.