## **2007 FOR PROFIT CORPORATION** - ANNUAL REPORT

## **DOCUMENT # M46116** 1. Entity Name PREFER CORPORATION



**FILED** Jan 11, 2007 08:00 AM **Secretary of State** 

Principal Place of Business

Mailing Address

6187 OVERSEAS HWY MARATHON, FL 33050 US POST OFFICE BOX 510028

KEY COLONY BEACH, FL 33051

DO NOT WRITE IN THIS SPACE

01082007 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

FERIA, MANUEL PEREZ 9440 SW 55 ST MIAMI, FL 33165

STREET ADDRESS CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
Fil. After Ma	E NOW!!! FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.	' <sub>□</sub>	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS FERIA, MANUEL PEREZ PO BOX 510028 N/A KEY COLONY BEACH, FL				U00000583245 01/11/07-80064-010 150.00	
NAME STREET ADDRESS CITY-ST-ZIP	FERIA, MANUEL PEREZ PO BOX 510028 N/A KEY COLONY BEACH, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FERIA, ADDY PEREZ PO BOX 510028 N/A KEY COLONY BEACH, FL		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME						

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 10 or Block 11 if

**SIGNATURE**