2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000074525

1. Entity Name
FERRERO EXECUTIVE GROUP, CORP.

Principal Place of Business	Mailing Address
15902 SW 66 TERRACE MIAMI, FL 33193	15902 SW 66 TERRACE MIAMI, FL 33193

01252007   No Chg-P   CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
01-0737277	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FERRERO, JOE
15902 SW 66 TERRACE
MIAMI, FL 33193

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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

·FILE NOW!!! FEE IS $150.00 **After May 1, 2007 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U000000649778 03/07/07-80063-025 150.00

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	FERRERO, JOE
STREET ADDRESS	15902 SW 66 TERRACE
CITY-ST-ZIP	MIAMI, FL 33193

TITLE	VP
NAME	FERRERO, ISABEL
STREET ADDRESS	15902 SW 66 TERRACE
CITY-ST-ZIP	MIAMI, FL 33193

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   2/5/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #