

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147626

FILED
May 01, 2008
Secretary of State

Entity Name: FERRARI TRADE CORPRORATION

Current Principal Place of Business:

3300 N.E. 192 STREET
412
AVENTURA, FL 33180

New Principal Place of Business:

1161 SOUTH PARK RD
201
HOLLYWOOD, FL 33021

Current Mailing Address:

3300 N.E. 192 STREET
412
AVENTURA, FL 33180

New Mailing Address:

1161 SOUTH PARK RD
201
HOLLYWOOD, FL 33021

FEI Number: 20-0464115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SLEIMAN, WAGNER M
Address: 3300 N.E. 192 STREET = 412
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SLEIMAN, WAGNER M
Address: 1161 SOUTH PARK RD = 201
City-St-Zip: HOLLYWOOD, FL 33021

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: WAGNER SLEIMAN

DP

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date