

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2005 8:00 am
Secretary of State

09-06-2005 90139 042 ***158.75

DOCUMENT # P04000070010	
1. Entity Name FERRER PRODUCTIONS & TALENT AGENCY INC	



Principal Place of Business 9427 FOINTEANBLUE BLVD SUITE 210 MIAMI, FL 33172	Mailing Address 9427 FOINTEANBLUE BLVD SUITE 210 MIAMI, FL 33172
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2. Principal Place of Business 15970 W. STATE RD. 84	3. Mailing Address 15970 W. SR. 84
Suite, Apt. #, etc. STE 231	Suite, Apt. #, etc. STE 231
City & State SUNRISE, FLORIDA	City & State SUNRISE, FLORIDA
Zip 33326	Zip 33326
Country US.	Country US.

09022005 Chg-P CR2E034 (10/03)

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LATIN NETWORK CONSULTANTS INC 2853 EXECUTIVE PARK DR SUITE 201 WESTON, FL 33331	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERRER, LINO 9427 FOINTEANBLUE BLVD, SUITE 210 MIAMI, FL 33172 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Mania Teresa Garcia P.O. Box 974. Juana Diaz PR 00795
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ANGULO, GENESIS A 9427 FOINTEANBLUE BLVD, SUITE 210 MIAMI, FL 33172 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Vanessa Luz Figueroa P.O. Box 974 Juana Diaz P.R. 00795
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANGULO, FLORALBA 9427 FOINTEANBLUE BLVD, SUITE 210 MIAMI, FL 33172 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Michelle M. Figueroa P.O. Box 974 Juana Diaz PR 00795
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Alberto R. Figueroa P.O. Box 974 Juana Diaz PR 00795
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

08/01/05 777-382-2660