

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000103725**

1. Entity Name  
**PROMINENT SIRE CORP.**



Principal Place of Business  
**9858 GLADES ROAD  
SUITE 185  
BOCA RATON, FL 33434**

Mailing Address  
**9858 GLADES ROAD  
SUITE 185  
BOCA RATON, FL 33434**



01122008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1757975**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**FEROLA, SR., FRANK F.  
9858 GLADES ROAD  
SUITE 185  
BOCA RATON, FL 33434**

**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE DS  
NAME CARLSON, CURTIS  
STREET ADDRESS ONE SE THIRD AVE STE 1200  
CITY-ST-ZIP MIAMI, FL 33131

TITLE DP  
NAME FEROLA, SR, FRANK F.  
STREET ADDRESS 9858 GLADES ROAD, # 185  
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE DVP  
NAME FEROLA, VERA  
STREET ADDRESS 9858 GLADES ROAD, # 185  
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE D  
NAME GREENSTEIN, ROSALIND  
STREET ADDRESS 9858 GLADES RD STE 185  
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000797203  
01/29/08-80065-001 158.75

**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:** *Vera Ferola*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date *1/16/08*

Daytime Phone #