

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000126904

FILED
Apr 29, 2008
Secretary of State

Entity Name: FERRARI BR CORPORATION

Current Principal Place of Business:

1470 RIVAL TERRACE
NORTH PORT, FL 34286 US

New Principal Place of Business:

Current Mailing Address:

1470 RIVAL TERRACE
NORTH PORT, FL 34286 US

New Mailing Address:

FEI Number: 26-1418771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRARI, EDSON
2536 TRAVERSE AV
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

FERRARI, EDSON
2536 TRAVERSE AVE
NORTH PORT, FL 34286 US

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: EDSON FERRARI

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: FERRARI, EDSON
Address: 2536 TRAVERSE AV
City-St-Zip: NORTH PORT, FL 34286 US

Title: VS D () Delete
Name: FERRARI, RITA
Address: 2536 TRAVERSE AV
City-St-Zip: NORTH PORT, FL 34286 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERRARI, EDSON
Address: 2536 TRAVERSE AVE
City-St-Zip: NORTH PORT, FL 34286 US

Title: VP (X) Change () Addition
Name: FERRARI, RITA
Address: 2536 TRAVERSE AVE
City-St-Zip: NORTH PORT, FL 34286 US

Title: D () Change (X) Addition
Name: FIGUEIREDO, ADELICMAR
Address: 2536 TRAVERSE AVENUE
City-St-Zip: NORTH PORT, FL 34286 US

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: EDSON FERRARI

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date