

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90154 038 ***150.00

DOCUMENT # **P94000031497**

1. Entity Name

FERDINANDO INTERNATIONAL ENTERPRISES, INC.



Principal Place of Business

10211 GRAY EAGLE DRIVE
ORLANDO FL 32821
US

Mailing Address

10211 GRAY EAGLE DRIVE
ORLANDO FL 32821
US

2. Principal Place of Business

117 KINGS RIDGE LOOP
Suite, Apt. #, etc.

3. Mailing Address

117 KINGS RIDGE LOOP
Suite, Apt. #, etc.

City & State

DAVENPORT FL.

City & State

DAVENPORT FL.

4. FEI Number

59-3238684

Applied For

Not Applicable

Zip

Country

US

Zip

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BYRD & GANTT CPA'S PA
3355 W VINE ST.
102
KISSIMMEE FL 34741**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME FERINANDO, BRIAN
STREET ADDRESS 10211 GRAY EAGLE DRIVE
CITY-ST-ZIP ORLANDO FL 32821

TITLE VPD ☐ Delete
NAME FERDINANDO, VALERIE
STREET ADDRESS 10211 GRAY EAGLE DRIVE
CITY-ST-ZIP ORLANDO FL 32821

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Change ☐ Addition
NAME FERDINANDO, BRIAN
STREET ADDRESS 117 KINGS RIDGE LOOP
CITY-ST-ZIP DAVENPORT FL 33897

TITLE VPD ☐ Change ☐ Addition
NAME FERDINANDO, VALERIE
STREET ADDRESS 117 KINGS RIDGE LOOP
CITY-ST-ZIP DAVENPORT FL 33897

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: **B. Ferdinando** **BRIAN FERDINANDO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/14/06

Daytime Phone #

**863 419
7671**