

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000067876 (9)

1. Corporation Name

FERCOR, INC.



Principal Place of Business

12320 S.W. 96TH STREET
MIAMI FL 33186

Mailing Address

12320 S.W. 96TH STREET
MIAMI FL 33186

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

CORTIZO, MAYRA Y
12320 S.W. 96TH STREET
MIAMI FL 33186

3. Date Incorporated or Qualified	3a. Date of Last Report
08/31/1995	
4. FEI Number	Applied For
65-0616110	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☒ Yes ☐ No
10. Name and Address of New Registered Agent	

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	FERNANDEZ, RAFAEL	
STREET ADDRESS	12100 S.W. 97TH TERRACE	
CITY-STATE-ZIP	MIAMI FL 33186	
TITLE	V	☐ DELETE
NAME	CORTIZO, GUILLERMO M	
STREET ADDRESS	12320 S.W. 96TH STREET	
CITY-STATE-ZIP	MIAMI FL 33186	
TITLE	T	☐ DELETE
NAME	FERNANDEZ, OFELIA	
STREET ADDRESS	12100 S.W. 97TH TERRACE	
CITY-STATE-ZIP	MIAMI FL 33186	
TITLE	S	☐ DELETE
NAME	CORTIZO, MAYRA Y	
STREET ADDRESS	12320 S.W. 96TH STREET	
CITY-STATE-ZIP	MIAMI FL 33186	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 this corporation or the registered or trustee employee of the corporation as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an affidavit.

SIGNATURE: *Guillermo M. Cortizo*
NAME OF SIGNING OFFICER OR DIRECTOR

4/5/96 305-267-8977
DATE TELEPHONE

CR2E034 (12/95)