


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2006 8:00 am**  
**Secretary of State**

05-03-2006 90202 023 \*\*\*150.00

<b>DOCUMENT # P96000058005</b> 1. Entity Name <b>FERGUS, INC.</b>					
Principal Place of Business <b>520 BRICKELL KEY DR., STE 0-305 MIAMI, FL 33131</b>			Mailing Address <b>520 BRICKELL KEY DR., STE 0-305 MIAMI, FL 33131</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  <b>TRANSGLOBAL CORPORATE ADM LLC 520 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131</b>				7. Name and Address of New Registered Agent Name <b>Transglobal Corporate Administration, LLC</b> Street Address (P.O. Box Numbers Not Acceptable) <b>520 Brickell Key Drive - Suite 0.305</b> City <b>miami</b> FL <b>33131</b>	
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  <b>Samuel P. Haven</b> DATE <b>04/20/06</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>FREEMAN, STEPHEN A</b> <b>520 BRICKELL KEY DR., STE 0-305</b> <b>MIAMI, FL 33131</b> <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	<b>DP</b> <b>HAVEN, SAMUEL P</b> <b>520 BRICKELL KEY DR., STE 0-305</b> <b>MIAMI, FL 33131</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: 			<b>Samuel P. Haven</b> <b>04/20/06</b> <b>305-3743800</b> <small>Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		

40000103



02282006 Chg-P CR2E034 (11/05)

4. FEI Number  
**65-0725944**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRANSGLOBAL CORPORATE ADM LLC  
520 BRICKELL KEY DRIVE  
SUITE 0-305  
MIAMI, FL 33131

Name  
**Transglobal Corporate Administration, LLC**  
 Street Address (P.O. Box Numbers Not Acceptable)  
**520 Brickell Key Drive - Suite 0.305**  
 City **miami** FL **33131**

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**520 BRICKELL KEY DR., STE 0-305**  
**MIAMI, FL 33131** ☐ Delete

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