2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900002029

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

16RT ChARIOTTE, Fl 33948

RT CAARIOTTE, FL

1. Entity Name

FERRARA ENTERPRISES, INC.

Principal Place of Business

Mailing Address

3072 LESSING ST.

3072 LESSING ST.

3. Mailing Address

City & State

Suite, Apt. #, etc.

PORT CHARLOTTE FL 33948

2. Principal Place of Business

IZZO, JOHN P

180 N. INDIANA AVE., SUITE 5 **ENGLEWOOD FL 34223**

9. This corporation is eligible to satisfy its Intangible

PRESIDENT

QUINTIN FERRARA

VICE PRESIDENT

BEYNE FERRARA

3072 LESSING

3072 LESSING 57

Tax filing requirement and elects to do so.

(See criteria on back)

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

NAME

TITLE NAME

TITLE

NAME

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11.

PORT CHARLOTTE FL 33948-1843

Country

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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TITLE

NAME

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NAME STREET ADORESS

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STREET ADDRESS

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STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

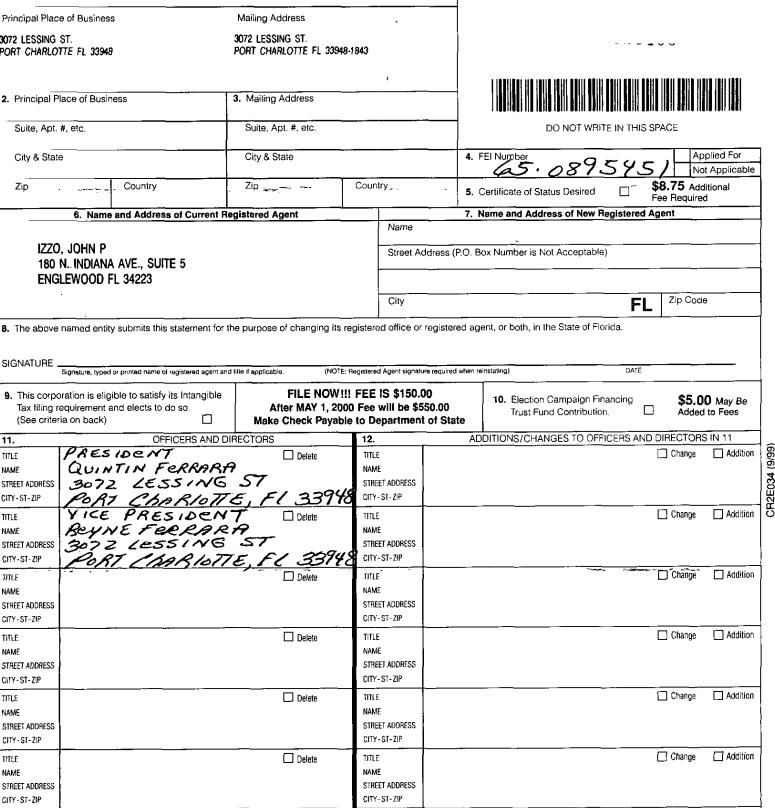
CITY-ST-ZIP

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CITY-ST-7IP

FILED Mar 03, 2000 8:00 am Secretary of State

03-03-2000 90039 042 ***150.00



13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied entail 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 for trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attack

SIGNATURE:

Date Daytime Phone #