

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000055914

FILED  
Jan 21, 2012  
Secretary of State

Entity Name: FABATV INC

**Current Principal Place of Business:**

11860 WEST STATE RD 84  
SUITE B-1  
DAVIE, FL 33325

**New Principal Place of Business:**

**Current Mailing Address:**

11860 WEST STATE RD 84  
SUITE B-1  
DAVIE, FL 33325

**New Mailing Address:**

FEI Number: 45-2540873      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BANKS, HEATHER  
751 SW 148TH AVE  
APT 1008  
DAVIE,, FL 33325 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BANKS, HEATHER A  
Address: 11860 WEST STATE RD 84 SUITE B1  
City-St-Zip: DAVIE, FL 33325 US

Title: CFO  
Name: BANKS, CLAUDIA M  
Address: 11860 WEST STATE RD 84 SUITE B1  
City-St-Zip: DAVIE, FL 33325

Title: CDO  
Name: BARBIERI, CARLOS M  
Address: 11860 WEST STATE RD 84 SUITE B1  
City-St-Zip: DAVIE, FL 33325

I hereby 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 all other like empowered.

SIGNATURE: CLAUDIA BANKS

VP

01/21/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date