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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	G 11 19	DIVISION O	F CORPORATI	ONS				
	MENT #	P93000	018293 (9	9)					
1. Corporation	n Name		(,	- /					
FAN F	FUELER, INC.					# ### ### ### #### #### #### #### ##### ##### ##### ##### ##### ##### ##### #####		(ABB.) 45146 4.4	
Principal Place	of Business		Mailing Address				II EBIII BEIDI		
529 67TH STREET 5124 N. 31ST PLACE									
#417	**************************************		#512						
U\$	ACH FL 34217		PHOENIX FL 85016 US			3. Date Incorporated or Qualified	3a . Da	te of Last R	leport
		······································				03/08/1993	-	05/01/19	195
2. Principal Pt 21 5124 N	ace of Business 1. 31st Plac	_ ⊢	2a. Mailing Address			4. FE4 Number 59-3173491			Applied For
Suite Apt.			Suite, Apt. #, etc			5. Certificate of Status Desired			Not Applicable Additional
		2	7			5. Germicate of Status Desired	_ 		Required
City & State Phoeni	x. Arizona	ļ.	City & State B Phoenix, A	rizona		6. Election Campaign Financing Trust Fund Contribution	\Box		May Be
_				· · ·		8. This corporation has liability for	intanoible I		d to Fees
24 850 1 6	23		9 850 1 6	30 Country	•		No.	av a loci s	195.002
	9. Name and Add	iress of Current Re	gistered Agent		т	10. Name and Address of New F	legistered	Agent	
MILLED	EDECEDION III			81	Name				
MILLER, FREDERICK III 529 67TH STREET				82	Street Ad	dress (P.O. Box Number is Not Acceptal.	de)		
#417					i	· · · · · · · · · · · · · · · · · · ·			
HOLME	S BEACH FL 3421	7		84	City				
					• • •		FL	_	p Code
or registere	ed agent, or both, in tr	ne State of Fiorida. S	uch change was authoriz	ed by the com	named corporation's bo	oration submits this statement for the pur ard of directors. Thereby accept the app	pose of on	anging its r	egistered office
TEOTIMES VVII	th, and accept the obli	gations of, Section 6	07.0505, Florida Statutes	š. ,				. rogiato co	ogone. rean
SIGNATURE _	Signature, typed or printed nam	ne of registered agent and to	eitająńsalik (NC	ne Skjiskost Apo	disagnithment pu	out when the estating	041:		
12.		OFFICERS AND DIF		13.		ADDITIONS/CHANGES TO OFF	ICERS ANI	DIRECTO	iRS IN 12
TITLE	MILLER, FREDE	DICK III	DELETE	1 1 DINE				Change	Addition Addition
NAME STREET ADDRESS	529 67TH STRE			1.2 NAME 1.3 STREET	ADDOESO				
CITY-ST-ZIP	HOLMES BEAC			14 City - S					
107LE	D		☐ DELETE	2 1 TITLE				Change	Addition
NAME	LAMONICA, PE			2.2 NAME					
STREET ADDRESS	5124 N 31 PL A			2 3 STREET	ADDRESS				
CITY-ST-ZIP TITLE	PHOENIX AZ 85	סוטא	DELETE	2.4.017 - 5	1-2IP		···	T) 05	
NAME	D	Thomas		3 1 TITLE 3 2 NAME			l	Change	Addition
STREET ADDRESS	5124 N. 31	Thomas st Place, krizona 850	#512	3.3 STHEET	ADDRESS				
CITY+S1-ZIP	Phoenix, A	rizona 850	16	3.4 CITY - S					
TITLE			DELFTE	4 1 1HLF			ı	Change	Add-tion
NAME Parties Associate				4.2 NAME					
STREET ADDRESS CITY-ST-ZIP				4.3 STHEET					
TITLE			DELF 16	4.4 CITY - S 5 1 TITLE	I · ZIP		ī	Change	Addit on
NAME			<u></u> :	5.2 NAME			,		
STREFT ADDRESS				5.3 STREE!	ADDRESS				
CITY - ST - ZIP				54 CITY-S	F - ZIP				
TITLE			□ DELETE	6 17171.6			[Change	Addition
NAME STREET ADDRESS				6.2 NAME	ADDRESS				
CHY-ST-ZIP				63 STREE!	!				
	certify that the inform	ation supplied with the	nis filing is voluntarily furn	ished and does	not qualify	for the exemption stated in Section 119.6	07(3)(k), Elc	rida Statute	as, 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 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 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR