

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000051207

FILED
Mar 06, 2007
Secretary of State

Entity Name: FAVER, INC.

Current Principal Place of Business:

3430 MAIN HIGHWAY
SUITE 202
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

3430 MAIN HIGHWAY
SUITE 202
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 59-3273226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLE, CHRISTIAN P
1111 BRICKELL BAY DRIVE
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VILLE, CHRISTIAN
Address: 1111 BRICKELL BAY DRIVE
City-St-Zip: MIAMI, FL 33131 US

Title: S () Delete
Name: TOMMASINI, BRUNO
Address: 6810 SW 45TH LANE - UNIT 6
City-St-Zip: MIAMI, FL 33155

Title: S () Delete
Name: DUCATILLON, REGIS
Address: 7000 SW 146 ST.
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 331581726

Title: S () Delete
Name: DUCATILLON, SHIRLEY
Address: 7000 SW 146 ST.
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 331581726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: TOMMASINI, BRUNO
Address: 6810 SW 45TH LANE - UNIT 6
City-St-Zip: MIAMI, FL 33155 US

Title: S (X) Change () Addition
Name: DUCATILLON, REGIS
Address: 7000 SW 146 ST.
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 331581726 US

Title: S (X) Change () Addition
Name: DUCATILLON, SHIRLEY
Address: 7000 SW 146 ST.
City-St-Zip: VILLAGE OF PALMETTO BAY, FL 331581726 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: VILLE CHRISTIAN

P

03/06/2007

Electronic Signature of Signing Officer or Director

_____ Date