

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 745373

(1)

1. Corporation Name

F.A.I.R., INC.

Principal Place of Business

Mailing Address

2886 FERNLEY DR., EAST. HOME BOX 94
WEST PALM BEACH FL 33415

2886 FERNLEY DR., EAST. HOME BOX 94
WEST PALM BEACH FL 33415

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

GLASSMAN, HERMAN
5800 FERNLEY DR W, #72
W. PALM BEACH FL 33415

3. Date Incorporated or Qualified

12/27/1978

4. FEI Number

59-1882296

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE

Herman Glassman

(NOTE: Registered Agent signature required when reinstating)

7/24/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME MARSHALL, ALMA
STREET ADDRESS 5780 FERNLEY DR W. #150
CITY-ST-ZIP W. PALM BEACH FL

TITLE ☒ DELETE

NAME RATNER, HAROLD
STREET ADDRESS 5800 FERNLEY DR W. #71
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE ☐ DELETE

NAME GLASSMAN, HERMAN
STREET ADDRESS 5800 FERNLEY DR W. #72
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☒ DELETE

NAME COHEN, RICHARD
STREET ADDRESS 5800 FERNLEY DR W. #18
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE ☒ DELETE

NAME APPEL, LEO
STREET ADDRESS 5800 FERNLEY DR W. #44
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☒ DELETE

NAME MUCKLER, ALFRED
STREET ADDRESS 2886 FERNLEY DR E. #44
CITY-ST-ZIP WEST PALM BEACH FL 33415

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME ALMA MARSHALL
1.3 STREET ADDRESS 5780 FERNLEY DR W #150
1.4 CITY-ST-ZIP W PALM BEACH FL

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME JULIA GATTER
2.3 STREET ADDRESS 5730 Fernley Dr. E #67
2.4 CITY-ST-ZIP W P B FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME Cohen Richard
4.3 STREET ADDRESS 5800 Fernley Dr. W #18
4.4 CITY-ST-ZIP W P Bch FL

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME D APPEL LEO
5.3 STREET ADDRESS 5800 Fernley Dr. W #44
5.4 CITY-ST-ZIP W. Palm Bch FL

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME Muckler ALFRED
6.3 STREET ADDRESS 2886 Fernley Dr. E #44
6.4 CITY-ST-ZIP W P Bch FL 33415

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Herman Glassman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/24/98

(561) 969-6614

CR2E037 (5/98)

FILED
Jul 30 1998 8:00am
Secretary of State

