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.PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F95000006031 (7)

FAUSTINA, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address PATRICIA LANIER, EUROPEAN INVESTMENT MGMT PATRICIA LANIER. EUROPEAN INVESTMENT MGMT 11999 SAN VINCENTE BLVD., STE. 440 11999 SAN VINCENTE BLVD., STE. 440 DO NOT WRITE IN THIS SPACE LOS ANGELES OA 90049 LOS ANGELES CA 90049 3. Date Incorporated or Qualified 12/12/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2503055 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HENIN, JEROME IPI OF CENTRAL FLA, INC. Street Address (P.O. Box Number is Not Acceptable) 933 LEE RD., STE. 402 83 ORLANDO FL 32810 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOT), Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSTD DELETE Change. ☐ Addition TITLE 1.1 TITLE LANIER, PATRICIA NAME 12 NAME 11999 SAN VICENT BLVD., #440 SAN VICENTE STREET ADDRESS 1.3 STREET ADDRESS LOS ANGELES CA CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE

CITY-ST-ZIP 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapged, or on an attachment with an address.

3.2 NAME

41 TITLE 4. 2 NAME

5.1 THILE

5.2 NAME

6.1 TITLE

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SIGNATURE:

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