FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H80578 (8) A FABULOUS AFFAIR, INC.													
Principal Place of Business Mailing Address													
C/O MARK F. LEYY 100 CENTURY BLVD. W PALM BEACH FL 33417 C/O MARK F. LEYY 100 CENTURY BLVD. W PALM BEACH FL 33417-2282													
								- [3. Date Incorporated or Qualified	3a, Date of		eport	
Principal Place of Business 2a, Mailing Address									10/14/1985 4. FEI Number	04/02/1		- Fa-	
21	INCO OF DUSINE	26					Ì	59-2636398	Applied For Not Applicable				
Suite, Apt. #, etc. Suite, Apt. #, etc.								 †		SR 75 Additional			
22				27					5. Certificate of Status Desired		Fee Re		
City & Stat	le		City & State					6. Election Campaign Financing		5.00	May Be		
23			28					ļ	Trust Fund Contribution			o Fees	
Zip T	-	Country	h	Zip			1		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	o Name a	5) nd Address of Currer	29 t Registe	red Agent	30	1 _			Florida Statutes 10. Name and Address of New Re				
i Ev	Y, MARK F.					81	Name		10.				
CENTURY VILLAGE ADMIN. BLDG 100 CENTURY BLVD. W PALM BEACH FL 33417						82 83	Street	Addres	s (P.O. Box Number is Not Acceptal	ole)			
						84	City			FL 85	Zip (Code	
11. Pursuant office or ragent La	to the provisio registered age am familiar with	ns of Sections 607.050 nt, or both, in the State n, and accept the oblig	2 and 607 of Florida ations of, 9	7.1508, Florida S Such change Section 607.050	Statutes, was auth 05, Florid	the above orized by a Statute	e-named the corp s.	corpor	ation submits this statement for the policy board of directors. I hereby accepted the control of		iging it ent as	s registered registered	
SIGNATURE	Sharatata tyong o	printed hame of registered 8gr	and and title it i	annicabin	(NOTE: Da	naielarad And	not elemature	required :	when reinstaling)	DATE			
12.	orginalore, system or	OFFICERS AN			(VOTE: N	13.	m signature	теципец	ADDITIONS/CHANGES TO OFFIC		CTOR	S IN 12	
TITLE	VSD		· ,	DELET	E	1.3 TITLE	1				hange	Addition	
NAME	LEVY, MAI	rk f.			1	1.2 NAME	[[
STREET ADDRESS	100 CENT W PALM E	URY BLVD.				1.3 STREET						[1	
CHY-ST-ZIP TITLE	PD	ENON IL		DELET	·	1.4 CITY - S 2.1 TITLE	1 - ZIP			T c	hange	Addition	
NAME	LEVY, STA	CEY		Lad Delta	`	2.2 NAME	- (1_0	i kunga		
STREET ADDRESS	4 SHANN					23 STREET	ADDRESS					ì	
City - St - ZiP	W PALM E					2.4 CITY-5	J					}	
TITLE	S			DELET	E	3.1 TITLE					hange	Addition	
NAME	FLOYD, O	RILLA F.(AST S)			1	3.2 NAME	[ĺ	
STREET ADDRESS		NLEA DRIVE				33 STREET	ADDRESS					1	
CITY-ST-ZIP	W PALM 6	BEACH FL				3.4. CITY-5	ST-ZIP					}	
TITLE				DELET	Ε	4.1 TITLE					hange	Addition	
NAME						4.2 NAME						}	
STREET ADDRESS	i 					4.3 STREET	ADDRESS					ĺ	
CITY-51-7(5)	ļ					4.4 CITY - S	T-ZIP						
TITLE				☐ DELET	E	5.1 TITLE	- "				hange	Addition	
NAME]					5.2 NAME	ļ]	
STREET ADDRESS	1					5.3 STREET	ADDRESS					l 1	
C(1Y - ST - 2)P						5.4 CITY - S	T-ZIP			·····			
1iflF				☐ DELET	E	61 TITLE					hange	☐ Addition	
NAME]					6.2 NAME	Ì					}	
STREEL ADDRESS						6.3 STREET	ADDRESS						

6.4 CITY-ST-ZIP 14. I do hereby certily 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 it 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 chapter 607 on an attachment with an address.

SIGNATURE:

STREEL ADDRESS City-St-ZIP

April 7, 1997

561-640-3131

FILED

Apr 10 1997 8:00am

Secretary of State

18175