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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

FABUS ENTERPRISES, INC.

FILED May 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						INI AINI NAN AINI AINI AINI IN
11953 WADE TALLAHASSE US	SBORO RD. EE FL 32311-9710	11953 WADESBORO RD. TALLAHASSEE FL 32311-9710 US		DO NOT WRITE IN THI	S SPACE	
					3. Date Incorporated or Qualified 06/12/1986	
2. Principal Place of Business 2s. Mailing Address					4. FEI Number	Applied For
21 11945	WADESBORD Rd	26 11945 WADESBORU RJ			59-27 19432	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
23		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		Zip Country		8. This corporation owes or has paid the current year Intengible		
24	25 29		30	,, <u> </u>		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent
	ARLSON, JOHN D.		81	Name		
	30 E. LAFAYETTE ST.		82	Street Ado	Street Address (P.O. Box Number is Not Acceptable)	
	E 112		_			
TA	LLAHASSEE FL 32301		83			
			84	City		85 Zip Code
					poration submits this statement for the purpose tion's board of directors. I hereby accept the a	L '
SIGNATURE	Signature, typed or printed name of registered ag-	on and title if applicable (NC DIDRECTORS	OTE. Registered Age	nnt signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	70	DELETE	1.1 TOTLE			Change
NAME	Fabus, Davio		1.2 NAME			
STREET ADDRESS	11953 WADESBORO RD.		1.3 STREET	ADDRESS 11	945 WADESBORD 12	
CITY-ST-ZIP	TALLAHASSEE FL	,	1.4 CITY - S	I .		
TITLE	STD	☑ DELETE	2 1 TITLE			Change Addition
NAME	FABUS, M. JANE		2.2 NAME	1		
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL		2. 4 CITY -			
TITLE	210	☐ DELETE	3.1 TITLE	5	TO	Change Addition
NAME	FABUS LINGA DAT	PLENE	3.2 NAME	F	ABUS, LINDA DARLENE 1945 WADESBORD NO	
STREET ADDRESS	11945 WADESBUR		3.3 STREET	ADDRESS 1	1945 WADISBURGIA	
CITY+S1-ZIP	TALLIAHASSEE, FL	3754	3 4. CITY-	ST-ZIP	ALLA . FC. 32311	
TITLE		T DELETE	4.1 TITLE	}		☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	}		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-S	1 - 7IP		Change Addition
ſ		☐ breet	5.1 TILLE			r Cuange Li vodilloti
NAME CTREET ADDRESS			5.2 NAME	ADDDEED		
STREET ADDRESS			5.3 STREET			
CITY-ST-ZIP TITLE	_ <u></u>	☐ DELETE	5.4 CITY - S 6.1 TITLE	1-511.		Change Addition
NAME			6.2 NAME			Shongs Pudition
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - S			
0111-01-48			0.4 01111-5	1-211		

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 suppliemental 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.

DAVID E. FABUS 4.29.88