


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # J90194  
1. Entry Name  
FAB EQUIPMENT LEASING, INC.



Principal Place of Business: 926-26TH STREET, WEST PALM BEACH, FL 33407  
Mailing Address: 926-26TH STREET, WEST PALM BEACH, FL 33407

**DO NOT WRITE IN THIS SPACE**



04112005 No Chg-P CR2E034 (10/03)

4. FEI Number: 65-0004173 Applied For: Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
MOTTO, LILLIAN B  
926 26TH ST.  
WEST PALM BEACH, FL 33407

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MIOTTO, LILLIAN
STREET ADDRESS	926 26TH ST
CITY-ST-ZIP	WEST PALM BCH, FL
TITLE	D
NAME	MIOTTO, VALENTINO
STREET ADDRESS	926 26TH ST
CITY-ST-ZIP	WEST PALM BCH, FL
TITLE	V
NAME	RUTH PETERS
STREET ADDRESS	926 26TH ST
CITY-ST-ZIP	WEST PALM BCH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000332743  
04/26/05-80070-015 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Lillian Miotto Director Date: 4/15/05 Daytime Phone #: 561-746-466

LILLIAN MIOTTO