

A12

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # M08037
1. Entity Name
FAB AIR CORP.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 30 PM 4:22

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 7500 NW 69 AVE.		3. Mailing Address 7500 NW 69 AVE.	
Suite, Apt. #, etc. REAR BLDG 2-5		Suite, Apt. #, etc. REAR BLDG 2-5	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33166	Country US	Zip 33166	Country US

REINSTATEMENT 03
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DO NOT WRITE IN THIS SPACE	4. FEI Number 59-2455947		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
	7. Name and Address of Current Registered Agent			
	Name FABIO TELLEZ Street Address (P.O. Box Number is Not Acceptable) 7500 NW 69 AVE. REAR BLDG 2-5 City MIAMI FL Zip Code 33166			

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 *Fabio Tellez* **9/7/03**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(P/D) FABIO TELLEZ 7500 NW 69th AVE. R-2 MIAMI, FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000023514680 10/02/03--01053--030 **300.00
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12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Fabio Tellez* **9/7/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2003-B (12/02)

2/2

FAB AIR CORP.

TO WHOM IT MAY CONCERN:
TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE FOR 2003 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT .

CORDIALLY


FABIO TELLEZ
PRESIDENT