2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M15903

1. Entity Name
FAME INTERNATIONAL, INC.

FILED
07 MAR -9 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
12100 S.W. 112TH AVE. MIAMI, FL 33176	12100 S.W. 112TH AVE. MIAMI, FL 33176

02102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2711045
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ANTONI, GREGORY
12100 SW 112TH AVE
MIAMI, FL 33176

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ANTONI, GREGORY
STREET ADDRESS	12100 SW 112TH AVE
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	S
NAME	ANTONI, GREGORY R.
STREET ADDRESS	12100 SW 112TH AVE
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	T
NAME	ANTONI, GREGORY
STREET ADDRESS	12100 SW 112TH AVE
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

200093706342
03/19/07--01002--015 **158.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered.

SIGNATURE: _____ 02-28-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 02-10-06 Daytime Phone #