

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052162

**FILED**  
**Feb 12, 2008**  
**Secretary of State**

**Entity Name:** FABIAN INTERNATIONAL CONSULTING INC.

**Current Principal Place of Business:**

25741 SE 41 PL  
ISSAQUAH, WA 98029

**New Principal Place of Business:**

3259 RANCHO FAMOSA  
CARLSBAD, CA 92009

**Current Mailing Address:**

25741 SE 41 PL  
ISSAQUAH, WA 98029

**New Mailing Address:**

3259 RANCHO FAMOSA  
CARLSBAD, CA 92009

**FEI Number:** 59-3725376

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOSS, EDWARD CPA  
480 N ORLANDO AVE  
#218  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: FABIAN, BARBARA G  
Address: 25741 SE 41 PL  
City-St-Zip: ISSAQUAH, WA 98029

Title: VD ( ) Delete  
Name: FABIAN, JOSEPH V  
Address: 25741 SE 41 PL  
City-St-Zip: ISSAQUAH, WA 98029

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** JOSEPH V FABIAN

VD

02/12/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date