


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90003 002 ***159.00

DOCUMENT # P06000049027 1. Entity Name FATABLOUS INC.					
Principal Place of Business 2221 SE 23RD ROAD HOMESTEAD, FL 33035			Mailing Address 2221 SE 23RD ROAD HOMESTEAD, FL 33035		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 80-4673755	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent IRVIN, AKILAH 2221 SE 23RD ROAD HOMESTEAD, FL 33035			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / Registered Agent AKILAH IRVIN 2221 SE 23rd Road Homestead FL 33035		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PIR AKILAH IRVIN 2221 SE 23rd Rd Home Stead FL 33035	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. President AKILAH IRVIN 2221 SE 23rd Road Homestead FL 33035		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AKILAH IRVIN 2221 SE 23rd Rd Homestead FL 33035	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec April Parker 2221 SE 23rd Homestead FL 33035		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AKILAH IRVIN 2221 SE 23rd Rd Homestead FL 33035	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP April Parker 2221 SE 23rd Rd Homestead FL 33035		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AKILAH IRVIN 2221 SE 23rd Rd Homestead FL 33035	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP April Parker 2221 SE 23rd Rd Homestead FL 33035		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AKILAH IRVIN 2221 SE 23rd Rd Homestead FL 33035	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP April Parker 2221 SE 23rd Rd Homestead FL 33035		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AKILAH IRVIN 2221 SE 23rd Rd Homestead FL 33035	
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: <u>AKILAH IRVIN for Fatablous inc</u> 4/27/07 305 230-9992 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					