

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P39319 (9)
1. Corporation Name
FABWEL, INC.

Principal Place of Business 1838 MIDDLEBURY ST. P. O. BOX 1366 ELKHART IN 46515-1366	Mailing Address 1838 MIDDLEBURY ST. P. O. BOX 1366 ELKHART IN 46515-1366
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/19/1992	
21		26		4. FEI Number 35-1857405	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC WELTER, EDWARD P. 1838 MIDDLEBURY ST. ELKHART IN	1.1 TITLE	V UTAH WHITE 1838 MIDDLEBURY ST. ELKHART, IN 46516
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VDS GARDNER, JOHN W. 1838 MIDDLEBURY ST. ELKHART IN	2.1 TITLE	V MICHAEL I MILLER ONE OWENS CORNING PARKWAY TOLEDO, OH 43659
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VPD STOUT, RAYMOND M. 1838 MIDDLEBURY ST. ELKHART IN	3.1 TITLE	V WILLIAM F. DENT ONE OWENS CORNING PARKWAY TOLEDO, OH 43659
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	AS GILLARD, CYNTHIA 121 W. FRANKLIN ST. ELKHART IN	4.1 TITLE	S DENNIS L. JARVELA ONE OWENS CORNING PARKWAY TOLEDO, OH 43659
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	D DOMENICO CECERE ONE OWENS CORNING PARKWAY TOLEDO, OH 43659
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	D JERRY L. WEINSTEIN ONE OWENS CORNING PARKWAY TOLEDO, OH 43659
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 4/24/98 219.522.8473

CR2E034 (10/97)

**1998 PROFIT CORPORATION
ANNUAL REPORT
ADDITIONAL CHANGES**

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADD. CITY-ST-ZIP	S GARDNER, JOHN W. 1838 MIDDLEBURY ST. ELKHART, IN 46516 <input checked="" type="checkbox"/> CHANGE
TITLE NAME STREET ADD. CITY-ST-ZIP	P STOUT, RAYMOND M. 1838 MIDDLEBURY ST. ELKHART, IN 46516 <input checked="" type="checkbox"/> CHANGE