

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000062881 (6)

1. Corporation Name

FARERI INVESTMENTS, INC.



Principal Place of Business

Mailing Address

1877 COLONIAL DRIVE
CORAL SPRINGS FL 33071
409

1877 COLONIAL DRIVE
CORAL SPRINGS FL 33071
409

3. Date Incorporated or Qualified
09/09/1993

3a. Date of Last Report
06/20/1995

2. Principal Place of Business

2a. Mailing Address

21 1500 N.W. 62ND ST

26 1500 N.W. 62ND ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 105

27 # 105

City & State

City & State

23 FT. LAUDERDALE, FL

28 FT. LAUDERDALE, FL

Zip 33309

Country USA

Zip 33309

Country USA

4. FEI Number

65-0437746

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FARERI, ANTHONY
1877 COLONIAL DRIVE
CORAL SPRINGS FL 33071
NEW ADDRESS

81 Name

82 Street Address (P.O. Box Number is Not Applicable)

1200 HOLIDAY DRIVE APT # 7

83

84 City

FT. LAUDERDALE

FL

85 Zip Code

33316

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

Signature, typed or printed name of registered agent and title in application.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME FARERI, ANTHONY
STREET ADDRESS 1877 COLONIAL DRIVE
CITY-ST-ZIP CORAL SPRINGS FL
NEW ADDRESS

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME FARERI, MICHELLE
STREET ADDRESS 1877 COLONIAL DRIVE
CITY-ST-ZIP CORAL SPRINGS FL
NEW ADDRESS

ANTHONY FARERI
1200 HOLIDAY DRIVE APT # 7
FT. LAUDERDALE, FL 33316
DIRECTOR
3167 LAKESHORE DRIVE
DEERFIELD BEACH, FL 33442

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

14. I do hereby certify that the information supplied on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 107, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

Anthony Fareri
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/96 (954) 351-9400
Date Daytime Phone #

CR2E034 (12/95)