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FILED

Jan 21 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000051474 (2)

1. Corporation Name

F.A. INVESTMENTS CORP.

Principal Place of Business

1112 WESTON ROAD  
#168  
WESTON FL 33326  
US

Mailing Address

1112 WESTON ROAD  
#168  
WESTON FL 33326  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/12/1994

4. FEI Number

65-0505704

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

REBOREDO, GASTON  
1107 ADVANA AVENUE  
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name

REBOREDO, GASTON

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

2566 JARDIN WAY

83

84 City

WESTON

FL

85 Zip Code

33327

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

1/12/98

12. OFFICERS AND DIRECTORS

TITLE VP  
NAME REBOREDO, GASTON  
STREET ADDRESS 340 MINORCA AVE STE 7  
CITY-ST-ZIP CORAL GABLES FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P.D.T.  
1.2 NAME REBOREDO, GASTON  
1.3 STREET ADDRESS 2566 JARDIN WAY  
1.4 CITY-ST-ZIP WESTON, FL 33327

2.1 TITLE VP, D. S.  
2.2 NAME REBOREDO, GASTON SR.  
2.3 STREET ADDRESS 2501 BRICKELL AV. APT-701  
2.4 CITY-ST-ZIP MIAMI FL 33129

3.1 TITLE VP, D.  
3.2 NAME REBOREDO, MARINA  
3.3 STREET ADDRESS 2501 BRICKELL AV. APT-701  
3.4 CITY-ST-ZIP MIAMI FL 33129

4.1 TITLE MVP  
4.2 NAME REBOREDO, REBECA  
4.3 STREET ADDRESS 2566 JARDIN WAY  
4.4 CITY-ST-ZIP WESTON FL 33327

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

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:

GASTON REBOREDO 1/12/98 (954) 885-9828

CR2E034 (10/97)