

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # *PA5000016580*

1. Corporation Name

FABB INVESTMENTS CORP.

Principal Place of Business
**13925 N. Kendall Drive
 Miami, Florida 33183**

Mailing Address
**10090 SW 143rd Street
 Miami, Florida 33176**

3. Date of Incorporation
2/24/95

3a. Date of Last Report
1995

4. FIC Number
65-0652359

Applied Fee
 For Annual Report

5. Check box if Status is: ☒ **X**

\$8.75 Additional
 Fee Required

6. Director Compensation: ☐ **None**

\$5.00 May Be
 Added to Fee

8. This corporation has liability for the state of Florida
 Florida Statute: ☐ **Yes** ☐ **No**

2. Principal Place of Business
13925 N. Kendall Drive

2a. Mailing Address
10090 SW 143rd Street

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. **# 601**

27. City & State

23. **Miami, Florida**

28. **Miami, Florida**

24. **33183**

25. **USA**

29. **33176**

30. **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Fern Oransky
 10090 SW 143rd Street
 Miami, Florida 33176**

81. Name

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

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Section 609.01, Florida Statutes, I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am the duly authorized agent of the corporation for the purpose of filing this report with the Department of State.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	President/Secretary	☐ Director
NAME	Fern Oransky	
STREET ADDRESS	10090 SW 143rd St, Miami, FL	
CITY, ST, ZIP		
TITLE		☐ Director
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Director
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Director
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Director
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONAL CHARGES TO OFFICERS AND DIRECTORS

TITLE	Vice-President	☐ Director
NAME	Robert Oransky	
STREET ADDRESS	10090 SW 143rd Street	
CITY, ST, ZIP	Miami, Florida 33143	
TITLE		☐ Director
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Director
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Director
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

**100001858191
 -06/11/96--01100--028
 ***235.75**

SIGNATURE:

Robert Oransky, V.P.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)

6/10/96