SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS -

DOCUMENT # P9600081066 (8)

ARTHUR A. FABER, C.L.U., INC.

FILED Aug 21 1997 8:00am Secretary of State

Principal Place of Business 2208 S CYPRESS BEND DR #407 POMPANO BEACH FL 33069 2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip Country	Mailing Address 2208 \$ CYPRESS BEND DR POMPANO BEACH FL 3306: 26. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/27/1996 4. FEI Number C.5 O O O O O O O O O O O O O O O O O O O
24 25	29 30		Personal Property Tax due June 30. Yes No
FABER, ARTHUR A 2208 S CYPRESS BEND POMPANO BEACH FL 3:	3069	83 City	ress (P.O. Box Number is Not Acceptable) FL 85 Zip Code Porration submits this statement for the purpose of changing its registered.
SIGNATURE		thorized by the corporated Statutes. Registered Agent signature requirements	
- AATA	FFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PSTD MAME FABER, ARTHUR A STREET ADDRESS CITY-ST-ZIP POMPANO BEACH	BEND DR #407	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-ST-ZIP	Change Addition
NAME STREET ADDRESS CITY-SY-ZIP	DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETÉ	4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME	DELETE	6.1 TITLE 6.2 NAME	☐ Change ☐ Addition

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.