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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000022256

FARBER ANTIQUES, INC.

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90198 021 ***150.00



Principal Place of Business Mailing Address					a 11919 HS18 HSS1 S1HS SH11 ISS1
618 ELDORADO LANE 618 ELDORADO LANE					
DELRAY BEACH	1 FL 33444	DELRAY BEACH FL 33444		DO NOT WRITE IN THIS SPACE	
	•			3. Date Incorporated or Qualifed	3 SPACE
	•			03/09/1998	1
6 Daire singet Di	less of Business	2a. Mailing Address		4. FEI Number	Applied For
	lace of Business		Augus	165-0819005	Not Applicable
21 167 HE ZUD AVENUE 26 187 HE ZUD Suite, Apt. #, etc. Suite, Apt. #, etc.			HUENUE	(e) -001700S	\$8.75 Additional
			u Ei	5. Certificate of Status Desired	Fee Required
22 VELR City & State		City & State	4 1 No.	6. Election Campaign Financing	\$5.00 May Be
⊢ `		28 33444	usA	Trust Fund Contribution	Added to Fees
23 334 Zip	Country		Country	8. This corporation owes the current year in	
	25	29 30	•	Personal Property Tax.	Yes No
24	g. Name and Address of Current			10. Name and Address of New Registered	Agent
			81 Name		
FARI	BER, NANCY RAY	-	00 00 100	(D.O. Barrishirania Net Assestable)	
618	ELDORADO LANE		82 Street Address (P.O. Box Number is Not Acceptable)		
DELRAY BEACH FL 33444			83		
}	•				
			84 City	Fi	85 Zip Code
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					
I affice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's poard of directors. I nereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Law					
SIGNATURE	Signature, typed of printed name of registered agen	t and title if applicable. (NOTE: Registi	ered Agent signature require	ed when reinstating) DATE	7
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DPT		.1 TITLE		Change Addition
NAME	FARBER, NANCY RAY	1,	.2 NAME		
STREET ADDRESS	618 ELDORADO LANE	1	.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33444	4	4 CITY-\$T-ZIP	•	
TITLE	VPS		1 TITLE		☐ Change ☐ Addition
NAME	FARBER, RUSSELL D	1 2	2 NAME		
STREET ADDRESS	618 ELDORADO LANE	2	3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33444		4 CITY-ST-ZIP		\
TITLE	DELIVIT DENOTTE GOTTY		A TITLE	en service de la companya del companya de la companya del companya de la companya	Change Addition
NAME		3	.2 NAME		
STREET ADDRESS			3 STREET ADDRESS		
\			.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE			A TITLE		☐ Change ☐ Addition
NAME		,	. 2 NAME		
STREET ADDRESS			.3 STREET ADDRESS	·	1
1			I.4 CITY-ST-ZIP		
CITY-ST-ZIP			i.1 TITLE		Change Addition
TITLE			2 NAME		_ , _
NAME			3.3 STREET ADDRESS		}
STREET ADDRESS			4 CITY-ST-ZIP		
CITY-ST-ZIP				\$	☐ Change ☐ Addition
· ·	e e e		3.2 NAME		_ , _
NAME		1	3.3 STREET ADDRESS		.4
STREET ADDRESS	1. 14 th 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6.4 CITY-ST-ZIP	•	
CITY OF 71D	İ	■ 0	OIL 1-01-12		l l

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, with all other like empowered.

SIGNATURE: