

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000089230

Entity Name: F.A.B. CONSULTANTS, INC.

FILED
Oct 20, 2008
Secretary of State

Current Principal Place of Business:

9507 SW 160TH STREET
280
MIAMI, FL 33157

New Principal Place of Business:

6855 SW 81ST STREET
260
MIAMI, FL 33143

Current Mailing Address:

P.O. BOX 162509
MIAMI, FL 33116

New Mailing Address:

P.O. BOX 570577
MIAMI, FL 33257

FEI Number: 65-0869472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FABIO, HERBERT
8340 SW 166TH STREET
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HERBERT FABIO

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FABIO, HERBERT
Address: 8340 SW 166TH STREET
City-St-Zip: MIAMI, FL 33157

Title: T () Delete
Name: FABIO, DEBRA
Address: 8340 SW 166TH STREET
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: FABIO, NIGEL
Address: 8340 SW 166TH STREET
City-St-Zip: MIAMI, FL 33157

Title: S () Delete
Name: FABIO, SHENELLE
Address: 8340 SW 166TH STREET
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT FABIO

PD

10/20/2008

Electronic Signature of Signing Officer or Director

Date