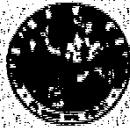


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 19 AM 3:08

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # F66477 (3)

1. Corporation Name

FAHDEV, INC.

Principal Place of Business

**% ABBEY MANAGEMENT, INC.
4040 SOUTHWEST FRWY., SUITE 535
HOUSTON TX 77027**

Mailing Address

**% ABBEY MANAGEMENT, INC.
4040 SOUTHWEST FRWY., SUITE 535
HOUSTON TX 77027**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/08/1982

3a. Date of Last Report

04/18/1994

4. FEI Number

76-0121381

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

B1 Name

B2 Street Address (P.O. Box Number Is Not Acceptable)

B3

B4 City

FL

B5 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 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 title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**P
DWECK, MORRIS
4040 SOUTHWEST FRWY. #535
HOUSTON TX**

**S
DWECK, MORRIS
4040 SOUTHWEST FRWY #535
HOUSTON TX**

**T
HUDGINS, G. K
4040 SOUTHWEST FRWY. #535
HOUSTON TX**

**D
SEMAO, J. KIM
4040 SOUTHWEST FRWY #535
HOUSTON TX**

**D
SASSOON, EZRA
4040 SOUTHWEST FRWY. #535
HOUSTON TX**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

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

Change Addition

SEMAO, J. KIM

77027

Change Addition

SEMAO, J. KIM

77027

Change Addition

HUDGINS, G. K.

77027

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if applicable, on attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G. RENT HUDGINS

4.10.95

Date

713.333.2012

Daytime Phone #