

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **PO20000046729**

1. Entity Name  
**FAB Builders Inc**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 OCT -6 PM 4:13

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**3101 E Mallory St**  
Suite, Apt. #, etc.  
**Pensacola, FL**

3. Mailing Address  
**3101 E Mallory St**  
Suite, Apt. #, etc.

800023936948  
10/20/03--01009--021 \*\*150.00

City & State  
**Pensacola, FL**

City & State  
**PENSACOLA, FL.**

4. FEI Number  Applied For  
Not Applicable

Zip **32503** Country **USA**

Zip **32503** Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name **Mary Ellen Charters**  
Street Address (P.O. Box Number is Not Acceptable)  
**3101 E Mallory St**  
City **Pensacola** FL Zip Code **32503**

8. 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 **Mary Ellen Charters** DATE **10/06/03**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
(See criteria on back)

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President FABAIRO, JR - 3101 E Mallory St Pensacola, FL 32503	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>the</del> Secretary Mary Ellen Charters 3101 E Mallory St Pensacola 32505	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Mary Ellen Charters** Date **10/06/03** 850-906-9927  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034B (12/01)

October 6, 2003

To: Florida State Division of Corporations

From: Mary Ellen Charters, Secretary FAB Builders, Inc

We wish to reinstate this Corporation. I was the Registered agent & I moved from the Miami Area. It appears that renewal notification was not forwarded to me.

Thank you.

Mary Ellen Charters, Secretary  
FAB Builders, Inc