


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 # P97000066807 (3) 1. Corporation Name <p style="text-align: center;">FABER PROPERTIES, INC.</p>		

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
99 AUG 24 AM 11:33

Principal Place of Business 2750 N. Federal Highway Fort Lauderdale, FL 33306	Mailing Address 2750 N. Federal Highway Fort Lauderdale, FL 33306
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/01/1997		4. FEI Number 65-0786653		Applied For Not Applicable	
2. Principal Place of Business 21 20 N.W. Third Avenue Suite, Apt. #, etc.	2a. Mailing Address 26 20 N.W. Third Avenue Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22 City & State 23 Deerfield Beach, FL	27 City & State 28 Deerfield Beach, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip 33442	25 Country USA	29 Zip 33442	30 Country USA	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

Christiansen, Michael E
2750 N. Federal Highway
Fort Lauderdale, FL 33306

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1500 N. Federal Highway
83 Suite 200
84 City Fort Lauderdale
85 Zip Code FL 33304

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	Faber, Mike	
STREET ADDRESS	1550 N.W. 3rd St.	
CITY-ST-ZIP	Deerfield Beach, FL 33441	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS	20 N.W. 3rd Street AVENUE	
14 CITY-ST-ZIP	Deerfield Beach, FL 33441	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS	500002970355--5	
24 CITY-ST-ZIP	-03/25/99--01098--018	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS	***150.00 ***150.00	
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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: _____ Date: _____ Daytime Phone #: (954) 428-0590

MASTRIANA & CHRISTIANSEN, PA
ATTORNEYS AT LAW
1500 North Federal Highway, Suite 200
Fort Lauderdale, Florida 33304

Broward: (954) 566-1234
Dade: (305) 949-1234
Fax: (954) 566-1592
Fax: (954) 564-0222

mikec64029@aol.com (Mike Christiansen)
framoffice@aol.com (Ron Mastriana)
Sihoff5195@aol.com (Steve Hoffman)
cityatty@aol.com (Jon Henning)

August 23, 1999

Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399
ATTENTION: Mr. Sean Toner

Re: Faber Properties, Inc.
Med Scan Diagnostics & Imaging, Inc.
Light Essentials, Inc.
Hairhunters, Inc.

Dear Mr. Toner:

I've had several conversations with your customer service specialists over the past several weeks. They have been very helpful, and recommended that I send this letter to your attention. I hope the following explanation is sufficient for your needs.

As background, let me state the following:

- While we were doing our annual review of all the corporations for which our office is the registered agent, we discovered that there were approximately 20 corporations for which we had never received the Annual Report Forms;
- Not only did we not receive the first form, we did not receive the second one, either;
- We immediately contacted your office at 850-487-6056 and was advised that if we *immediately* submitted the Annual Report form (which was due by May 1, 1999), the corporations would *not be dissolved*;
- We were also advised that the late fee of \$550 *might* be waived since *the Annual Report Form was never received*. For this reason, we are directing this letter to your attention.

Thus far we have received the following items back from our clients:

- 1999 Annual Report Form for Faber Properties, Inc., along with check #1058 in the amount of \$150;

MASTRIANA & CHRISTIANSEN, PA

Mr. Sean Toner
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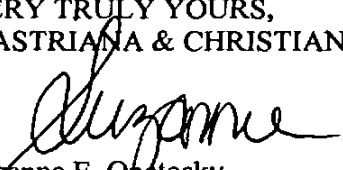
- 1999 Annual Report Form for Med Scan Diagnostics & Imaging, Inc., along with check #5026 in the amount of \$150;
- 1999 Annual Report Form for Light Essentials, Inc., along with check #636 in the amount of \$150; and
- 1999 Annual Report Form for Hairhunters, Inc., along with check #2909 in the amount of \$150.

We understand that there are procedures to be followed, but in light of the fact that approximately 20 Annual Report Forms were never received by our office, we would truly appreciate the timely filing of these Annual Report as well as the late fee being waived.

Should you have any questions, please call me *immediately*.

Thank you for your anticipated cooperation in this matter.

VERY TRULY YOURS,
MASTRIANA & CHRISTIANSEN, P.A.


Suzanne E. Opatosky
Secretary to MIKE CHRISTIANSEN