## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000000109

Entity Name: ABRAHAM TECHNICAL SERVICES, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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18071 TERRITORIAL ROAD MAPLE GROVE, MN 55369

Current Mailing Address: New Mailing Address:

18071 TERRITORIAL ROAD MAPLE GROVE, MN 55369

FEI Number: 41-1717647 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAKER, BRIAN

3734 131ST AVE. N. #15

CLEARWATER, FL 33762 US

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: CT CORPORATION 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP ( ) Delete Title: C (X) Change ( ) Addition

 Name:
 SCHMIDT, STEVEN J
 Name:
 SCHMIDT, STEVEN J

 Address:
 5280 SALEM LANE
 Address:
 5280 SALEM LANE

 City-St-Zip:
 LORETTO, MN 55357
 City-St-Zip:
 LORETTO, MN 55357

Title: VCV ( ) Delete Title: ( ) Change ( ) Addition Name: JACOBS, JON M Name:

Address: 180 MALLARD LANE Address: City-St-Zip: LORETTO, MN 55357 City-St-Zip:

Title: TCFO ( ) Delete Title: TP (X) Change ( ) Addition

Name: BAKER, BRIAN J Name: BAKER, BRIAN J

 Address:
 7332 NIAGRA LANE NORTH
 Address:
 7332 NIAGRA LANE NORTH

 City-St-Zip:
 OSSEO, MN 55311
 City-St-Zip:
 OSSEO, MN 55311

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BRIAN BAKER PRES 04/29/2005