2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2006
Secretary of State

DOCUMENT# F92984

Entity Name: A.B.A. INDUSTRIES, INC.

Current Principal Place of Business:

382 CIRCLE FREEWAY DR.
CINCINNATI, OH 45246 US

New Principal Place of Business:

Current Mailing Address:

382 CIRCLE FREEWAY DR.
CINCINNATI, OH 45246 US

New Mailing Address:

FEI Number: 59-0914814 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACFARLANE, ELLEN M
400 N. TAMPA STREET, SUITE 2300
TAMPA, FL 33602 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: COOK, ALVIN E
Address: 189 CONTAINER PLACE
City-St-Zip: CINCINNATI, OH 45246 US

Title: D ( ) Delete
Name: LABBE, GILLES
Address: 1111 SAINT CHARLES ST.WEST,STE 658
City-St-Zip: LONGUEIL, QUEBEC, QC J4K 5G4 CA

Title: D ( ) Delete
Name: BELANGER, REAL
Address: 1111 SAINT CHARLES ST.WEST,STE 658
City-St-Zip: LONGUEIL, QUEBEC, QC J4K 5G4 CA

Title: VP ( ) Delete
Name: COOK, DAVID A
Address: 189 CONTAINER PL
City-St-Zip: CINCINNATI, OH 45246 US

Title: VPTS (X) Delete
Name: BARNES, STEPHEN E
Address: 382 CIRCLE FREEWAY DR
City-St-Zip: CINCINNATI OH, OH 45246 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MESHAY, MICHAEL
Address: 189 CONTAINER PLACE
City-St-Zip: CINCINNATI, OH 45246 US

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

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

Title: VPF (X) Change ( ) Addition
Name: MICHALSKI, WILLIAM
Address: 382 CIRCLE FREEWAY DR
City-St-Zip: CINCINNATI OH, OH 45246 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM MICHALSKI VPF 07/25/2006

Electronic Signature of Signing Officer or Director — Date