

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N08000007666

Entity Name: ABBA'S HOUSE INC

Current Principal Place of Business:

750 CAROLINA AVE
FT LAUDERDALE, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

750 CAROLINA AVE
FT LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 26-3173509 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, JOSEPHINE
750 CAROLINA AVE
FT LAUDERDALE, FL 33312 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MITCHELL, JOSEPHINE
Address: 750 CAROLINA AVE
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: VP () Delete
Name: MITCHELL, ROBERT
Address: 750 CAROLINA AVE
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: D () Delete
Name: NELSON, LENVILLE
Address: 2221 58TH AVE APT #10
City-St-Zip: LAUDERHILL, FL 33313 US

Title: D () Delete
Name: PIKE, CRESETA
Address: PO BOX 120097
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: D () Delete
Name: LEWIS, ESTHER
Address: 4866 NW 14TH STREET HAMMOCK BLVD
City-St-Zip: COCONUT CREEK, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPHINE MITCHELL

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date