P04000049617

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	usiness Entity Name)
a)	usiness Entity Name)
	ocument Number)
(D	ocument Number)
Certified Conies	Certificates of Status
<u> </u>	
Special Instructions to	Filing Officer:
<u></u>	
	Office//se Only
	Xal /
	/14/119/1/
\	



200030390292

03/16/04--01027--017 **78.75

2001 HAR 15 P 3: 42
SECRETARY OF STATE

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	ABCD PROFESSIONAL SERVICES, INC					
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an original	inal and one (1) copy of the artic	les of incorporation and	a check for			
Enclosed are an origi	mar and one (1) copy or the area	ics of incorporation and	a check for.			
\$70.00	\$78.75	□ \$78.75	□ \$87.50			
Filing Fee	Filing Fee	Filing Fee	Filing Fee,			
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of			
		II.	Status			
		ADDITIONAL CO	PY REQUIRED			
	DADDAE	A MODOANI				
FROM:	BARBARA MORGAN Name (Printed or typed)					
rano (crimea or spea)						
1040 BAYVIEW DRIVE, SUITE 403						
Address						
FT. LAUDERDALE, FL 33304-2532						
-	City, State & Zip					
5.5y, 5.m.c 55 Esp						
954-565-7636						
Daytime Telephone number						

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:
ABCD PROFESSIONAL SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1040 BAYVIEW DRIVE SUITE 403 FT. LAUDERDALE, FL 33304-2532

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO PROVIDE CUSTOMER SERVICE RELATED SERVICES.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
BARBARA MORGAN ---- DIRECTOR
6111 BARRY ROAD MARGATE, FL 33063

DENZIL PARKES ---- DIRECTOR 1809 NW 49TH AVENUE COCONUT CREEK, FL 33063

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

BARBARA MORGAN 6111 BARRY ROAD MARGATE, FL 33063

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

BARBARA MORGAN 6111 BARRY ROAD MARGATE, FL 33063

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

3-8-04 Data

3-8-04 Date

Date

SECRETARY OF STATE