

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049617

**FILED**  
**Aug 31, 2007**  
**Secretary of State**

**Entity Name:** ABCD PROFESSIONAL SERVICES, INC.

**Current Principal Place of Business:**

1040 BAYVIEW DRIVE  
SUITE 403  
FT. LAUDERDALE, FL 333042532

**New Principal Place of Business:**

**Current Mailing Address:**

1040 BAYVIEW DRIVE  
SUITE 403  
FT. LAUDERDALE, FL 333042532

**New Mailing Address:**

**FEI Number:** 20-0955993      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MORGAN, BARBARA  
6111 BARRY ROAD  
MARGATE, FL 33063      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Election Campaign Financing Trust Fund Contribution ( )**.

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: MORGAN, BARBARA  
Address: 6111 BARRY ROAD  
City-St-Zip: MARGATE, FL 33063

Title: D      ( ) Delete  
Name: PARKES, DENZIL  
Address: 1809 NW 49TH AVENUE  
City-St-Zip: COCONUT CREEK, FL 33063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA MORGAN

RA

08/31/2007

Electronic Signature of Signing Officer or Director

Date