

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000044710

FILED
Jan 20, 2009
Secretary of State

Entity Name: ABC AMERICA, CORP

Current Principal Place of Business:

3900 NW 79 AVE
632
MIAMI, FL 33166 US

New Principal Place of Business:

3900 NW 79 AVE
634
MIAMI, FL 33166 US

Current Mailing Address:

3900 NW 79 AVE
632
MIAMI, FL 33166 US

New Mailing Address:

3900 NW 79 AVE
634
MIAMI, FL 33166 US

FEI Number: 20-4269941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARONA, NELSON
3900 NW 79 AVE
632
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

VARONA, NELSON
3900 NW 79 AVE
634
MIAMI, FL 33166 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: NELSON VARONA

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GALLARDO, ELENA
Address: 3900 NW 79 AVE SUITE 632
City-St-Zip: MIAMI, FL 33166 US

Title: P (X) Delete
Name: VARONA, RAFAEL N
Address: 3900 NW 79 AVE SUITE 632
City-St-Zip: MIAMI, FL 33166 US

Title: P (X) Delete
Name: VARONA, NELSON
Address: 3900 NW 79 AVE SUITE 632
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VARONA, NELSON
Address: 3900 NW 79 AVE SUITE 634
City-St-Zip: MIAMI, FL 33166 US

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: NELSON VARONA

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date