## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000059488

Entity Name: ABSTRACT ELECTRONICS, INC.

FILED Jan 07, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

4400 118TH AVENUE NORTH
SUITE 303
CLEARWATER, FL 33762

4400 118TH AVENUE NORTH
SUITE 300
CLEARWATER, FL 33762

CLEARWATER, FL 33762

Current Mailing Address: New Mailing Address:

4400 118TH AVENUE NORTH
SUITE 303
CLEARWATER, FL 33762

4400 118TH AVENUE NORTH
SUITE 300
CLEARWATER, FL 33762

CLEARWATER, FL 33762

FEI Number: 59-3387211 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MIZIO, ARMANDO F 25400 U.S. 19 NORTH - SUITE 210 CLEARWATER, FL 33763 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

COLANDREA, BRUNO

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Address:

City-St-Zip:

Title: DPT (X) Change ( ) Addition
Name: COLANDREA, CHRISTOPHER A

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

503 JOHNS PASS AVENUE Address: 6086 BAY LAKE DRIVE NORTH MADERIA BEACH, FL 33708 City-St-Zip: ST. PETERSBURG, FL 33708

Title: DVS ( ) Delete Title: DVPS (X) Change ( ) Addition

Name:POTTER, GREGORYName:COLANDREA, BRUNOAddress:5170 CHAMPIONSHIP CUP LANEAddress:503 JOHNS PASS AVENUECity-St-Zip:BROOKSVILLE, FL 34609City-St-Zip:MADERIA BEACH, FL 33708

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRUNO COLANDREA DVPS 01/07/2005