


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2008 8:00 am
Secretary of State

06-23-2008 90003 042 ****70.00

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1. Entity Name
 K.A.B.B., INC.



Principal Place of Business
 700 S 79 AVE
 POMPANO BEACH, FL 33068

Mailing Address
 700 S 79 AVE
 POMPANO BEACH, FL 33068

40108907



06152008 No Chg-NP CR2E037 (4/06)

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4. FEI Number
 65-0881745

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

LEMIEUX, PIERRE B
 700 SW 79 AVE
 POMPANO BEACH, FL 33068

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE LEMIEUX PIERRE BAZIL Pierre Bazil Lemieux 6/14/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD EXCEUS, FRANTZ 251 NE 58TH STREET MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD EXCEUS, CLAUDEL 630 SW 71ST TERR HOLLYWOOD, FL 33022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD EXCEUS, RAYNAL 17690 NE 6 AVE MIAMI, FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD EXCEUS, XAVIER 590 NW 116 STREET MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC LEMIEUX, PIERRE B 700 S. 79TH AVE POMPANO BEACH, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD CINMELUS, SARIMIN 78563 SW 13TH STREET #12 POMPANO BEACH, FL 33068

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pierre Bazil Lemieux 6-14-08 (954) 496-0748
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #