2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 828907

Title:

Name:

Address:

City-St-Zip:

FILED Feb 09, 2009 Secretary of State

Entity Name: ABSG CONSULTING INC.						
Current Principal Place of Business:			New Principal Place of Business:			
	RTHCHASE D I, TX 77060	RIVE US				
Current Mailing Address:			New Mailing Address:			
	RTHCHASE D I, TX 77060	RIVE US				
FEI Number:	13-2695912	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1201 HAYS SUITE 105	STREET	ORPORATION SYSTEM, INC.				
The above in the State		submits this statement for the pu	rpose of changing it	ts registered o	ffice or registered agent, or both,	
SIGNATUR						
Electronic Signature of Registered Agent			t		Date	
Election Can	npaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	TVPD () WEINER, JEFF 16855 NORTHO HOUSTON, TX	CHASE DRIVE	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	AIF () KIMBRELL, RO 1650 HIGHWAY SUGAR LAND,	′ 6, SUITE 100	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	CPD () NASSIF, TONY 16855 NORTHO HOUSTON, TX		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	S () BURTON, SARA 16855 NORTHO HOUSTON, TX	CHASE DRIVE	Title: Name: Address: City-St-Zip:	S,D (X) BURTON, SARA 16855 NORTHO HOUSTON, TX	CHASE DRIVE	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT D. KIMBRELL AIF 02/09/2009

(X) Delete

16855 NORTHCHASE DRIVE

HOUSTON, TX 77060 US

DEVLIN, THOMAS

() Change () Addition