

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15651

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: ABERN FINANCIAL, INC.

**Current Principal Place of Business:**

1500 SAN REMO AVE  
STE 250  
CORAL GABLES, FL 33146 US

**New Principal Place of Business:**

**Current Mailing Address:**

1500 SAN REMO AVE  
250  
CORAL GABLES, FL 33146 US

**New Mailing Address:**

FEI Number: 59-2942148

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

E.H.G. RESIDENT AGENTS INC.  
5100 TOWN CENTER CIRCLE  
STE 330  
BOCA RATON, FL 33486 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: ABERN, A MARTIN  
Address: 1500 SAN REMO #250  
City-St-Zip: CORAL GABLES, FL 33146

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

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: A. MARTIN ABERN

PSD

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date