

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007666

Entity Name: ABBA'S HOUSE INC

Current Principal Place of Business:

5181 POWERLINE ROAD
FT LAUDERDALE, FL 33309

Current Mailing Address:

P.O. BOX 120097
FT LAUDERDALE, FL 33312 US

FEI Number: 26-3173509

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABBA'S, HOUSE
5181 POWERLINE ROAD
FT LAUDERDALE, FL 33309 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: ABBA'S HOUSE

01/17/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MITCHELL, JOSEPHINE
Address 750 CAROLINA AVE
City-State-Zip: FT LAUDERDALE FL 33312

Title VP
Name MITCHELL, ROBERT
Address 750 CAROLINA AVE
City-State-Zip: FT LAUDERDALE FL 33312

Title D
Name LEWIS, ESTHER
Address 4866 NW 14TH STREET HAMMOCK
BLVD
City-State-Zip: COCONUT CREEK FL 33063

Title DIRECTOR
Name DRUMMOND, SHERYL
Address 4116 NW 88TH AVE
APT 434
City-State-Zip: SUNRISE FL 33315

Title DIRECTOR
Name BARRETT- JACK, CHARMAINE
Address 9130 NW 24TH ST
City-State-Zip: SUNRISE FL 33322

Title DIRECTOR
Name WILLIAMS , CROSRINE
Address 2642 NW 33RD ST
APT 1904
City-State-Zip: OAKLAND PARK FL 33309

Title DIRECTOR
Name DYER-WILLIAMS, ALTHEA
Address 7637 FAIRWAY BLVD
City-State-Zip: MIRAMAR FL 33083

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPHINE MITCHELL

PRESIDENT

01/17/2021

Electronic Signature of Signing Officer/Director Detail

Date