2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P24286

Entity Name: AMERICAN BUSINESS PROMOTIONS, A DIVISION OF AMERICAN BUSINESS FORMS, INCORPORATED

Current Principal Place of Business:

31 EAST MINNESOTA AVENUE GLENWOOD, MN 56334

Current Mailing Address:

31 EAST MINNESOTA AVENUE GLENWOOD, MN 56334

FEI Number: 41-1393684

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 US FILED Feb 11, 2019 Secretary of State 6673309344CC

Certificate of Status Desired: No

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

Officer/Director Detail :

ctor Detail :		
PSTD	Title	D
ZAVADIL, LARRY A	Name	BRYANT, JERRY
31 E MINNESOTA AVE	Address	31 E MINNESOTA AVE
GLENWOOD MN 56334	City-State-Zip:	GLENWOOD MN 56334
D	Title	D
NILAN, JOE	Name	EKSTRAND, RICK
31 E MINNESOTA AVE	Address	31 E MINNESOTA AVE
GLENWOOD MN 56334	City-State-Zip:	GLENWOOD MN 56334
DIRECTOR KONLE, DAVID 31 EAST MINNESOTA AVENUE	Title Name Address City-State-Zip:	DIRECTOR SKORDAHL, GARY 31 EAST MINNESOTA AVENUE GLENWOOD MN 56334
DIRECTOR NELSON, PETER 31 E. MINNESOTA AVE ALEXANDRI MN 56308	Title Name Address City-State-Zip:	PRESIDENT ZAVADIL, JUSTIN 31 EAST MINNESOTA AVENUE GLENWOOD MN 56334
	PSTD ZAVADIL, LARRY A 31 E MINNESOTA AVE GLENWOOD MN 56334 D NILAN, JOE 31 E MINNESOTA AVE GLENWOOD MN 56334 DIRECTOR KONLE, DAVID 31 EAST MINNESOTA AVENUE GLENWOOD MN 56334 DIRECTOR NELSON, PETER 31 E. MINNESOTA AVE	PSTDTitleZAVADIL, LARRY AName31 E MINNESOTA AVEAddressGLENWOOD MN 56334City-State-Zip:DTitleNILAN, JOEName31 E MINNESOTA AVEAddressGLENWOOD MN 56334City-State-Zip:DTitleNILAN, JOEAddressGLENWOOD MN 56334City-State-Zip:DIRECTORTitleKONLE, DAVIDName31 E AST MINNESOTA AVENUEAddressGLENWOOD MN 56334City-State-Zip:DIRECTORTitleNAMEAddressGLENWOOD MN 56334City-State-Zip:DIRECTORTitleNELSON, PETERName31 E. MINNESOTA AVEAddressCity State Zip:City State Zip:

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

SIGNATURE: JUSTIN ZAVADIL

PRESIDENT

02/11/2019

Date

Electronic Signature of Signing Officer/Director Detail

Date