

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 23, 2002 8:00 am**  
**Secretary of State**

01-23-2002 90060 033 \*\*\*150.00

**DOCUMENT # 289010**

1. Entity Name

**ABBA INC**

Principal Place of Business

**18361 SW 57TH ST  
 SW RANCHES FL 33331-2233  
 US**

Mailing Address

**18361 SW 57TH ST  
 SW RANCHES FL 33331-2233  
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-1154701**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCUDDER, KENNETH R  
 18361 SW 57TH STREET  
 SW RANCHES FL 33331-2233**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE K Scudder, SW RANCHES, FL is a new city. No physical change.  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	SCUDDER, KENNETH R	
STREET ADDRESS	18361 SW 57TH ST	
CITY-ST-ZIP	SW RANCHES FL 33331-2233	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SCUDDER, CAROLYN K	
STREET ADDRESS	18361 SW 57TH ST	
CITY-ST-ZIP	FORT LAUDERDALE FL 33331-2233	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SCUDDER, CAROL A	
STREET ADDRESS	18361 SW 57TH ST	
CITY-ST-ZIP	SW RANCHES FL 33331-2233	
TITLE	VD	<input type="checkbox"/> Delete
NAME	KREIMEYER, SHIRLEY K	
STREET ADDRESS	3300 NE 36TH ST AP 821	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308-6731	
TITLE	ST	<input type="checkbox"/> Delete
NAME	SCUDDER, CAROLYN K	
STREET ADDRESS	18361 SW 57TH ST	
CITY-ST-ZIP	SW RANCHES FL 33331-2233	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	SW RANCHES, FL 33331-2233	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth R Scudder **KENNETH R SCUDDER** 9 JAN 2002 954/522 1222  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

1.0001/1/01

CR2E034 (9/01)