

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 289010

FILED  
Feb 04, 2011  
Secretary of State

Entity Name: ABBA INC

**Current Principal Place of Business:**

1819 SE 17TH ST,  
APT 605  
FT LAUDERDALE, FL 33316 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 350035  
FT LAUDERDALE, FL 33335 US

**New Mailing Address:**

FEI Number: 59-1154701

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCUDDER-HIRSCH, CAROL A  
1819 SE 17TH ST  
APT 605  
FT LAUDERDALE, FL 33316 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: SCUDDER-HIRSCH, CAROL A  
Address: 1819 SE 17TH ST - APT 605  
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: DVP  
Name: SCUDDER, CAROLYN K  
Address: 1819 SE 17TH ST - APT 602  
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: DVST  
Name: HIRSCH, MARC I  
Address: 1819 SE 17TH ST - APT 605  
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: DVST  
Name: KREIMEYER, JOHN K JR  
Address: 1819 SE 17TH ST - APT 605  
City-St-Zip: FT LAUDERDALE, FL 33316 US

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: CAROL A SCUDDER-HIRSCH

PRES

02/04/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date