2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 597037

Entity Name: ABC CUTTING CONTRACTORS, INC.

FILED Jan 12, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2001 N. ANDREWS AVENUE POMPANO BEACH, FL 33069

Current Mailing Address: New Mailing Address:

2001 N. ANDREWS AVENUE POMPANO BEACH, FL 33069

FEI Number: 59-1521513 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAVIN, ANDY
2699 STIRLING ROAD
SUITE 100

KHAN, JEFFREY B LL.M
3300 UNIVERSITY DRIVE
SUITE 100

PORT LAUDERDALE, FL 33069 US CORAL SPRINGS, FL 33065 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: JEFFREY KHAN 01/12/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 MCCOY, LARRY W.,
 Name:
 MCCOY, FAITH,

 Address:
 2001 N ANDREWS AVE
 Address:
 2001 N ANDREWS AVE

 Address:
 2001 N ANDREWS AVE
 Address:
 2001 N ANDREWS AVE

 City-St-Zip:
 POMPANO BEACH, FL
 City-St-Zip:
 POMPANO BEACH, FL

Title: ST () Delete Title: TREA (X) Change () Addition

 Name:
 MCCOY, FAITH
 Name:
 MCCOY, FAITH

 Address:
 2001 N ANDREWS AVE
 Address:
 2001 N ANDREWS AVE

 City-St-Zip:
 POMPANO BEACH, FL
 City-St-Zip:
 POMPANO BEACH, FL

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 MCCOY, TERRY
 Name:
 O'SHEA, JOHN F

 Address:
 2001 N ANDREWS AVE
 Address:
 2001 N ANDREWS AVE

 City-St-Zip:
 POMPANO BEACH, FL
 City-St-Zip:
 POMPANO BEACH, FL

Title: () Delete Title: ST () Change (X) Addition

 Name:
 Name:
 PACHECOE, JÚLIE L

 Address:
 Address:
 2001 N ANDREWS AVENUE

 City-St-Zip:
 City-St-Zip:
 POMPANO BEACH, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FAITH MCCOY PD 01/12/2005