

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827173

FILED
Apr 07, 2004
Secretary of State

Entity Name: ABRAMS CONSTRUCTION, INC.

Current Principal Place of Business:

1945 THE EXCHANGE
STE 350
ATLANTA, GA 30339 US

New Principal Place of Business:

Current Mailing Address:

1945 THE EXCHANGE
SUITE 350
ATLANTA, GA 303392029 US

New Mailing Address:

FEI Number: 58-1093980 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: PATERNOSTRO, R.A.
Address: 1945 THE EXCHG, STE 350
City-St-Zip: ATLANTA, GA 33039

Title: D () Delete
Name: ABRAMS, ALAN R
Address: 1945 THE EXCHANGE, STE 400
City-St-Zip: ATLANTA, GA 30339

Title: D () Delete
Name: ABRAMS, J ANDREW
Address: 1945 THE EXCHG STE 300
City-St-Zip: ATLANTA, GA 30339

Title: PD (X) Delete
Name: MERRITT, B., M.,
Address: 1945 THE EXCHG, STE 350
City-St-Zip: ATLANTA, GA 30339

Title: VP () Delete
Name: HODGES, GEORGE
Address: 1945 THE EXCHANGE, STE 350
City-St-Zip: ATLANTA, GA 30339

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: HODGES, GEORGE
Address: 1945 THE EXCHANGE, STE 350
City-St-Zip: ATLANTA, GA 30339

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: RICK PATERNOSTRO

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04/07/2004

Electronic Signature of Signing Officer or Director

Date