2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000001140

916 BONITA LN

MANAHAWKIN, NJ 08050

Address: City-St-Zip:

Entity Name: ABACO MANAGEMENT CORP OF NJ

FILED Jan 25, 2006 Secretary of State

Entity Nai	me: ABACO	MANAGEMENT CORP OF NJ			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	SH AVE. SUIT OD, NJ 08701				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	SH AVE. SUIT OD, NJ 08701				
FEI Number:	: 22-3623163	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
SIMONE, RICHARD C SR. 7349 ULMERTON RD. LOT 1362 DESOTO ST. LARGO, FL 33771 US			SIMONE, DOROTHY 7349 ULMERTON RD LARGO, FL 33771	7349 ULMERTON RD. LOT 1362 DESOTO ST.	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: DOROTHY SIMONE				01/25/2006	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (HAMILTON, AN 20 BLUE HER BAYVILLE, NJ	ON LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (SIMONE, GAR 521 LAFAYET TOM RIVER, N	ΓΕ AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ST (SIMONE, RICH) Delete HARD C	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: AMANDA HAMILTON PRES 01/25/2006