

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000001140

FILED  
Jan 28, 2008  
Secretary of State

Entity Name: ABACO MANAGEMENT CORP OF NJ

## Current Principal Place of Business:

195 LEHIGH AVE. SUITE 6  
LAKEWOOD, NJ 08701

## New Principal Place of Business:

405 N. MAIN STREET  
BARNEGAT, NJ 08005

## Current Mailing Address:

195 LEHIGH AVE. SUITE 6  
LAKEWOOD, NJ 08701

## New Mailing Address:

405 N. MAIN STREET  
BARNEGAT, NJ 08005

FEI Number: 22-3623163

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMONE, DOROTHY  
7349 ULMERTON RD. LOT 1362 DESOTO ST.  
LARGO, FL 33771 US

## Name and Address of New Registered Agent:

GALLAGHER, SEAMUS  
121 EAST DAVIS BLVD.  
APT # 201  
TAMPA, FL, FL 33606 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: SEAMUS GALLAGHER

01/28/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HAMILTON, AMANDA  
Address: 20 BLUE HERON LN  
City-St-Zip: BAYVILLE, NJ 08721

Title: V (X) Delete  
Name: SIMONE, GARY A  
Address: 521 LAFAYETTE AVE.  
City-St-Zip: TOM RIVER, NJ 08753

Title: ST (X) Delete  
Name: SIMONE, RICHARD C  
Address: 916 BONITA LN  
City-St-Zip: MANAHAWKIN, NJ 08050

## 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:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: AMANDA HAMILTON

P

01/28/2008

Electronic Signature of Signing Officer or Director

Date