

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005483

Entity Name: ABI NETWORK SOLUTIONS, INC.

FILED
Sep 14, 2006
Secretary of State

Current Principal Place of Business:

618 AZALEA RD.
MOBILE, AL 36691

New Principal Place of Business:

50 WEST MAIN STREET
737
UNIONTOWN, PA 15401

Current Mailing Address:

PO BOX 91064
MOBILE, AL 36691

New Mailing Address:

50 WEST MAIN STREET
737
UNIONTOWN, PA 15401

FEI Number: 01-0637548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CD () Delete
Name: NEWTON, ANDREW M
Address: 4574 AVRIL CT.
City-St-Zip: MOBILE, AL 36608

Title: CEOD () Delete
Name: JOHN, A. STEPHEN
Address: 1115 NORTH GALLATIN AVE EXTENSION
City-St-Zip: UNIONTOWN, PA 15401

Title: CFOD () Delete
Name: BULLINGTON, PAUL E
Address: 700 CEDAR AVE.
City-St-Zip: FAIRHOPE, AL 36532

Title: CTOD () Delete
Name: DANIELS, ERIC R
Address: 270 HILLCREST RD. UNIT 804
City-St-Zip: MOBILE, AL 36608

Title: D () Delete
Name: NEWTON, GLYN E
Address: 513 ST. CHARLES LANE
City-St-Zip: KNOXVILLE, TN 37922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE (X) Change () Addition
Name: NEWTON, ANDREW M
Address: 4574 AVRIL CT.
City-St-Zip: MOBILE, AL 36608

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

Title: TREA (X) Change () Addition
Name: BULLINGTON, PAUL E
Address: 700 CEDAR AVE.
City-St-Zip: FAIRHOPE, AL 36532

Title: SECR (X) Change () Addition
Name: DANIELS, ERIC R
Address: 270 HILLCREST RD. UNIT 804
City-St-Zip: MOBILE, AL 36608

Title: D (X) Change () Addition
Name: PETER, HOPPER
Address: 120 ELMSLEY COURT
City-St-Zip: RIDGEWOOD, NJ 07450

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.

SIGNATURE: ADAM C. KASSAB

CFO

09/14/2006

Electronic Signature of Signing Officer or Director

Date