

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F72418

FILED
Apr 29, 2004
Secretary of State

Entity Name: ABC SERVICE CORPORATION

Current Principal Place of Business:

3730 COCONUT CREEK PARKWAY
SUITE 200
COCONUT CREEK, FL 33066 US

New Principal Place of Business:

Current Mailing Address:

3730 COCONUT CREEK PARKWAY
SUITE 200
COCONUT CREEK, FL 33066 US

New Mailing Address:

FEI Number: 59-2251710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAW, DANNY J
3730 COCONUT CREEK PARKWAY
SUITE 200
COCONUT CREEK, FL 33066 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: DST () Delete
Name: SHAW, DANNY
Address: 1417 PONCE DE LEON BLVD.
City-St-Zip: FT. LAUDERDALE, FL

Title: DP () Delete
Name: WAAS, RICHARD
Address: 11100 S.W. 92ND AVE.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: YARBOROUGH, HAROLD
Address: 15140 WHETSTONE WAY
City-St-Zip: FT. LAUDERDALE, FL

Title: D () Delete
Name: ROBERTSON, JIM
Address: 1360 NW 33RD ST
City-St-Zip: POMPANO BEACH, FL

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:

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: DANNY SHAW

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date