## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000000937

F-4:4 No---- ADAGGA DEVELOPMENT

CLARK, STEPHEN T

AUSTIN, TX 787014042

100 CONGRESS AVENUE STE 1590

Name:

Address:

City-St-Zip:

FILED Apr 27, 2004 Secretary of State

Entity Nai	me: ABACC	DA DEVELOPMENT	COMPANY					
Current Principal Place of Business:				New Principal Place of Business:				
1200 UNIVERSITY BLVD, SUITE 210 JUPITER, FL 33458 US				1200 UNIVERSITY BLVD. SUITE 210 JUPITER, FL 33458 US				
Current M	lailing Addı	ess:	New Mailing Address:					
1200 UNIVERSITY BLVD, SUITE 210 SUITE 210 JUPITER, FL 33458 US				1200 UNIVERSITY BLVD. SUITE 210 JUPITER, FL 33458 US				
FEI Number:	: 51-0372237	FEI Number Appl	lied For() FEI N	umber Not Appl	licable ( )	Certifica	te of Status De	sired ( )
Name and	l Address o	f Current Register	Name and Address of New Registered Agent:					
GARY, JO 701 US HI SUITE 402 NORTH PA	GHWAY 1 ?	I, FL 33408 US						
	named entit e of Florida.	ty submits this state	ment for the purpose	of changing i	ts registered	d office or r	egistered age	nt, or both,
SIGNATUR	RE:							
	Electr	onic Signature of R	egistered Agent				Date	
Election Car	mpaign Financ	ing Trust Fund Contrib	bution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P SALOUR, NA 1200 UNIVE JUPITER, FL	RSITY BLVD, SUITE 210	0	Title: Name: Address: City-St-Zip:		() Change	( ) Addition	
Title: Name: Address: City-St-Zip:	CLARK, TIM	ESS AVENUE STE 1590	0	Title: Name: Address: City-St-Zip:		( ) Change(	( ) Addition	
Title: Name: Address: City-St-Zip:	MINTZ, JOS	BORN SUITE #1100		Title: Name: Address: City-St-Zip:	D MINTZ, JOS 140 S DEAR CHICAGO, I	RBORN SUITI	. ,	
Title:	D	( ) Delete		Title:		( ) Change	( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: NADER G.M. SALOUR P 04/27/2004