

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004608

**FILED**  
**Jan 21, 2012**  
**Secretary of State**

**Entity Name:** ABBOTTSFIELD INDUSTRIAL TRAINING, INC.

**Current Principal Place of Business:**

10157 SW BARBUR BLVD #200-C  
PORTLAND, OR 97219

**New Principal Place of Business:**

**Current Mailing Address:**

10157 SW BARBUR BLVD #200-C  
PORTLAND, OR 97219

**New Mailing Address:**

**FEI Number:** 91-1459332      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DINWIDDIE, SHARON  
221 MCKENZIE AVE  
PANAMA CITY, FL 32401      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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** ILICA, PETER  
**Address:** PMB202 5114 POINT FOSDICK DRIVE NW, #E  
**City-St-Zip:** GIG HARBOR, WA 98335

**Title:** ST  
**Name:** ILICA, LILIANA  
**Address:** PMB 202 5114 POINT FOSDICK DRIVE NW, #E  
**City-St-Zip:** GIG HARBOR, WA 98335

I hereby 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 all other like empowered.

SIGNATURE: LILIANA ILICA

ST

01/21/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date