

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G23933

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: ABBYMARK INDUSTRIES, INC.

**Current Principal Place of Business:**

3751 ONE SAN JOSE PLACE  
SUITE # 15  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

9116 CYPRESS GREEN DRIVE  
JACKSONVILLE, FL 23356 US

**Current Mailing Address:**

3751 ONE SAN JOSE PLACE  
SUITE # 15  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

9116 CYPRESS GREEN DRIVE  
JACKSONVILLE, FL 32256 US

FEI Number: 59-2304352

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEVINE, WILLIAM A.  
3751 ONE SAN JOSE PLACE  
SUITE # 15  
JACKSONVILLE, FL 32256 US

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

LEVINE, WILLIAM A.  
9116 CYPRESS GREEN DRIVE  
JACKSONVILLE, FL 32256 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: WILLIAM A LEVINE

03/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LEVINE, WILLIAM A.,  
Address: 3751 ONE SAN JOSE PLACE, SUITE # 15  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D ( ) Delete  
Name: LEVINE, STEPHANY,  
Address: 3751 ONE SAN JOSE PLACE, SUITE # 15  
City-St-Zip: JACKSONVILLE, FL 32257

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LEVINE, WILLIAM A.,  
Address: 9116 CYPRESS GREEN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change ( ) Addition  
Name: LEVINE, STEPHANY,  
Address: 9116 CYPRESS GREEN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

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: WILLIAM A LEVINE

PD

03/08/2006

Electronic Signature of Signing Officer or Director

Date