2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J64331

Entity Name: A B SI TRANSLATION SERVICES, INC.

Apr 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8350 N.W. 52ND TERR SUITE 209 8004 NW 161 TERRACE **DORAL, FL 33166**

271

MIAMI LAKES, FL 33016

Current Mailing Address: New Mailing Address:

8004 NW 154 STREET 8004 NW 161 TERRACE

MIAMI LAKES, FL 33016 MIAMI LAKES, FL 33016

FEI Number: 59-2796867 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FUERST, MITCHELL S ESQ. FUERST, MITCHELL S ESQ 1001 BRICKELL BAY DRIVE, STE. 1804 1001 BRICKELL BAY DRIVE, STE. 2002

MIAMI, FL 33131 MIAMI, FL 33131 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: 04/22/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: () Delete Title: (X) Change () Addition MONSERRATE, FRANK PRES MONSERRATE, FRANK PRES Name: Name: 8350 NW 52ND TERR SUITE 209 8004 NW 161 TERRACE; #271 Address: Address:

City-St-Zip: DORAL, FL 33166 City-St-Zip: MIAMI LAKES, FL 33016

() Delete Title: Title: (X) Change () Addition MONSERRATE, TIFFANY VPRES Name: Name: MONSERRATE, TIFFANY VPRES 8350 NW 52ND TERR SUITE 209 Address: 8004 NW 161 TERRACE; #271 Address:

DORAL, FL 33166 MIAMI LAKES, FL 33016 City-St-Zip: City-St-Zip:

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: FRANK MONSERRATE **PRES** 04/22/2007