## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # L01008

(6)

A. B. FINANCING & INVESTMENTS, INC.

FILED Feb 27 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address							
9111 SW 151	AVENUE ROAD	9111 SW 151 AVENUE ROAD							
MIAMI FL 33196		MIAMI FL 33196				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	0.7.02		
						07/11/1989			
	ace of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
21		26				65-0131023		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	h1			5. Certificate of Status Desired		Additional	
22 City & State		City & State	City & State			• Floring Committee Figure 1		berlupe	
23		<b>├</b> ─ 'n ´	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country			8. This corporation owes or has paid the cu			
24	25	29	30			Personal Property Tax due June 30.	☐ Yes [	] Ňo	
	9. Name and Address of Curre	int Registered Agent		<b>.</b>	<del>_</del>	0. Name and Address of New Registered	Agent		
	DOS, S. SCOTT			<b>B1</b>   1	Vame				
	00 S.W. 288 STREET		82 Street Ac			(P.O. Box Number is Not Acceptable)			
	TE 312			B3					
HOI	MESTEAD FL 33030			63					
			[	<b>B4</b> (	City	FL	<b>85</b> Zip	Code	
11. Pursuant t	to the provisions of Sections 607.05	02 and 607 1508. Florida S	tatutes, the ab	nove-n	amed corpora	tion submits this statement for the purpose of	f changing i	its registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typind or printed name of registerial agent and title if applicable. (NOTE Registered Agent signature of					signature required w	hen reinstating) DATE			
12.	- <del></del>	NO DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PSD	L. DELETE					Change	☐ Addition	
NAME	BLISSETT, ANTHONY		1.2 NAME						
STREET ADDRESS 9111 SW 151 AVE RD CITY-ST-ZIP MIAMI FL			1.3 STREET ADDRESS					ŀ	
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	1.4 CITY-ST-ZIP DELETE 2.1 TITLE		ur		Change	Addition	
NAME			2.2 NAME					_	
STREET ADDRESS				2.3 STREET ADDRESS					
CITY-S1-ZIP			2. 4 CI	2. 4 CITY - ST - ZIP					
TITLE		☐ DELETE		3.1 TITLE			Change	Addition	
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 STF	REE1 ADI	DRESS				
CITY-ST-ZIP				TY-\$1-2	ZIP			4-100	
TITLE		☐ DELETE					L_ Change	☐ Addition	
NAME			4. 2 NA					[	
STREET ADDRESS				REET AD				İ	
CITY-ST-ZIP TITLE		DELETE		Y-ST-Z	ar .		Change	Addition	
NAME		E percie	5.2 NA						
STREET ADDRESS				AVIL Reet adi	DRESS				
CITY-ST-ZIP			- 1	Y-ST-Z					
TITLE		DELETE					Change	Addition	
NAME			6.2 NA	MÉ					
STREET ADDRESS			6.3 STF	REET AD	DRESS				
CITY - ST - ZIP			6.4 CIT	Y-ST-Z	ZIP			l	
	artifuthat the information countied	with this filing door not our				tion 119 07(3)(i) Florida Statutes, Liturther c	ortify that the	e information	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 frustog empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attact pright with an appears in the receiver of the corporation of the corpor

CICALATUDE.

lulyant

ANTHONY W. BLISSETT

8/19/98