

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011789

FILED  
Feb 07, 2008  
Secretary of State

Entity Name: ABTECH, LLC

**Current Principal Place of Business:**

1133 SOUTH UNIVERSITY DRIVE, SUITE 210  
FORT LAUDERDALE, FL 333243303

**New Principal Place of Business:**

**Current Mailing Address:**

1133 SOUTH UNIVERSITY DRIVE, SUITE 210  
FORT LAUDERDALE, FL 333243303

**New Mailing Address:**

1622 SW 103 LANE  
FORT LAUDERDALE, FL 33324

FEI Number: 20-2375819

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VARGHESE, ASHA  
1133 SOUTH UNIVERSITY DRIVE, SUITE 210  
FORT LAUDERDALE, FL 333243303 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

**MANAGING MEMBERS/MANAGERS:**

Title: MS ( ) Delete  
Name: VARGHESE, ASHA B  
Address: 1622 SW 103 LANE  
City-St-Zip: DAVIE, FL 33324 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MR ( ) Change (X) Addition  
Name: VARGHESE, BABU  
Address: 1622 SW 103 LANE  
City-St-Zip: FORT LAUDERDALE, FL 33324 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BABU VARGHESE

MGR

02/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date