

**2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000026590

**FILED**  
**Oct 23, 2007**  
**Secretary of State****Entity Name:** ABW ENTERPRISES LLC**Current Principal Place of Business:**4581 WESTON ROAD  
334  
WESTON, FL 33331**New Principal Place of Business:****Current Mailing Address:**4581 WESTON ROAD  
334  
WESTON, FL 33331**New Mailing Address:****FEI Number:** 20-4710929**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ADAMS, ROY A  
4149 E GARDENIA AVE  
WESTON, FL 33332 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: MGR ( ) Delete  
Name: ADAMS, ROY A  
Address: 4149 E GARDENIA AVE  
City-St-Zip: WESTON, FL 33332Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: MGR ( ) Change (X) Addition  
Name: ADAMS, ROY A JR  
Address: 4149 E GARDENIA AVE  
City-St-Zip: WESTON, FL 33332Title: MGR ( ) Change (X) Addition  
Name: ADAMS, NOELLE  
Address: 1401 WEST PACES FERRY ROAD APT 5112  
City-St-Zip: ATLANTA, GA 30327

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: ROY A ADAMS

MGR

10/23/2007

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