

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026590

Entity Name: ABW ENTERPRISES LLC

FILED
May 01, 2009
Secretary of State

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 ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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 33332

Title: MGR () Delete
Name: ADAMS, ROY A JR
Address: 4149 E GARDENIA AVE
City-St-Zip: WESTON, FL 33332

Title: MGR () Delete
Name: ADAMS, NOELLE
Address: 1401 WEST PACES FERRY ROAD APT 5112
City-St-Zip: ATLANTA, GA 30327

Title: MGR (X) Delete
Name: CATANZARO, JENEEN
Address: 125 RIVERWALK CIRCLE
City-St-Zip: SUNRISE, FL 33326 22

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: ADAMS, NOELLE
Address: 4149 E GARDENIA AVE
City-St-Zip: WESTON, FL 33332

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

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 ADAMS

MGR

05/01/2009

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