2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070390

Entity Name: ABPO INVESTMENTS, LLC

1850 S. OCEAN DRIVE UNIT 2706

HALLANDALE, FL 33009

Address:

City-St-Zip:

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1850 S. OCEAN DRIVE, UNIT 2706 HALLANDALE, FL 33009 **Current Mailing Address: New Mailing Address:** 1850 S. OCEAN DRIVE, UNIT 2706 HALLANDALE, FL 33009 FEI Number: 20-3169523 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: CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete TURRIAGO, OSCAR Name: Name: Address: 1850 S. OCEAN DRIVE UNIT 2706 Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: MGR () Delete Title: (X) Change () Addition MGR Name: FERREIA, BERNARDO Name: FERREIRA, BERNARDO Address: 1850 S. OCEAN DRIVE UNIT 2706 Address: 1850 S. OCEAN DRIVE UNIT 2706 City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: HALLANDALE, FL 33009 Title: MGR () Delete Title: () Change () Addition LOMELLI, ANDRES Name: Name: 1850 S. OCEAN DRIVE UNIT 2706 Address: Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: PANICCIA, PEDRO Name:

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 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.

Address:

City-St-Zip:

SIGNATURE: OSCAR TURRIAGO MGR 04/30/2006