

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003451

Entity Name: ABBI INVESTMENTS, LLC

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

2566 NW 86TH AVENUE
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

2566 NW 86TH AVENUE
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 20-4083489 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:

NIXON-CALAMARI, CHRISTINE P
13381 NW 7TH STREET
PLANTATION, FL 33325 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: MGRM () Delete
Name: HAWES, SAMUEL N
Address: 2566 NW 86TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: MGRM () Delete
Name: NIXON, SUZANNE S
Address: 2566 NW 86TH AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: MGRM () Delete
Name: ERRAR, DERRICK C
Address: 409 NW 161 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: MGRM () Delete
Name: ERRAR, HARRIET O
Address: 409 NW 161 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028 US

ADDITIONS/CHANGES:

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

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

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

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: SUZANNE S. NIXON

MGR

05/02/2007

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