

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000037620

Entity Name: ABATE GROUP, LLC

FILED  
Sep 28, 2012  
Secretary of State

**Current Principal Place of Business:**

672 CYPRESS GREEN CIRCLE  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

672 CYPRESS GREEN CIRCLE  
WELLINGTON, FL 33414 US

**New Mailing Address:**

FEI Number: 27-2312850

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ABATE, ROCCO  
672 CYPRESS GREEN CIRCLE  
WELLINGTON, FL 33414 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  
Name: ABATE, ROCCO  
Address: 672 CYPRESS GREEN CIRCLE  
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM  
Name: ABATE, DOMINIQUE  
Address: 672 CYPRESS GREEN CIRCLE  
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM  
Name: ABATE, CASSANDRA  
Address: 672 CYPRESS GREEN CIRCLE  
City-St-Zip: WELLINGTON, FL 33414 US

I hereby 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: ROCCO ABATE

MGRM

09/28/2012

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