

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 16, 2007  
Secretary of State**

DOCUMENT# L58904

Entity Name: A ABSOLUTE BAIL BONDING SERVICE, INC.

**Current Principal Place of Business:**

822 SARNO RD  
1  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

822 SARNO RD  
1  
MELBOURNE, FL 32935

**New Mailing Address:**

FEI Number: 59-3320512      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ALEXANDER, MICHAEL  
822 SARNO ROAD #1  
MELBOURNE, FL 32935      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

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: ALEXANDER, MICHAEL,  
Address: 822 SARNO ROAD #1  
City-St-Zip: MELBOURNE, FL 32935 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL ALEXANDER

PRES

08/16/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date