

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L95826

1. Entity Name  
ABUELO, INC.



Principal Place of Business

7423 COLLINS AVENUE  
MIAMI BEACH, FL 33141 US

Mailing Address

7423 COLLINS AVENUE  
MIAMI BEACH, FL 33141 US

**FILED**  
**Jun 22, 2007 08:00 AM**  
**Secretary of State**



06192007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. F-1 Number  
65-0226504

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MEJIA, CONSTANTINO  
7423 COLLINS AVE.  
MIAMI BCH., FL 33141

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

U000000766589  
06/22/07-80003-025 150.00

10. OFFICERS AND DIRECTORS

TITLE	PDV
NAME	MEJIA, CONSTANTINO
STREET ADDRESS	7423 COLLINS AVENUE
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	STD
NAME	MEJIA, MERCEDES
STREET ADDRESS	7423 COLLINS AVENUE
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Constantino Mejia*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-19-07, (305) 861-0291

Date

Daytime Phone #