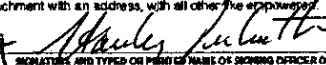


FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91454 015 ****70.00

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02000002531			
1. Entity Name ABC THRIFT, INC.			
Principal Place of Business 354 E DANIA BEACH BLVD DANIA BEACH, FL 33004		Mailing Address 354 E DANIA BEACH BLVD DANIA BEACH, FL 33004	
2. Principal Place of Business 222 N. Federal Suite, Apt. #, etc.		3. Mailing Address Highway Suite, Apt. #, etc.	
City & State Dania Beach, FL		City & State - -	
Zip 33004		Country USA	
4. FEI Number 01-0631979		Applied For Not Applicable	
5. Certificate of Status Desired X		\$9.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DE COSTA, VIVIANNE 600 NE 2ND ST, APT 306 DANIA BEACH, FL 33004		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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's name required when missing) DATE _____			
FILE NOW - FEE IS \$61.75		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
PD DE COSTA, VIVIANNE 600 NE 2ND ST #306 DANIA BEACH, FL 33004		Change Addition	
VD DI BONA, KATHLEEN 1601 S OCEAN DR, APT 1403 HOLLYWOOD, FL 33019		Change Addition	
SD TRINKES, LINDA 424 SE 3RD PL DANIA BEACH, FL 33004		Change Addition	
TD PERLMUTTER, STANLEY 600 NE 2ND ST, #306 DANIA BEACH, FL 33004		Change Addition	
D SHEEHAN, PATRICIA 1446 ATLANTIC SHORES BLVD HALLANDALE, FL 33009		Change Addition	
Change Addition		Change Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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 true and accurate information.			
SIGNATURE: 		Date: 4/28/03 954-927-3371	