

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 19, 2010
Secretary of State

Entity Name: ABILITIES VENTI, INC.

Current Principal Place of Business:

8300 SUNRISE LAKES BLVD. BLDG. 55, #310
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

8300 SUNRISE LAKES BLVD. BLDG. 55, #310
SUNRISE, FL 33322

New Mailing Address:

FEI Number: 51-0609968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENBERG, STEVEN M
11411 NW 15 STREET
PEMBROKE PINES, FL 33028 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: VP
Name: STONE, NICHOLAS W
Address: 1740 NW 86 AVE
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S
Name: GAMBLE, SARAH M
Address: 6448 MAYO STREET
City-St-Zip: HOLLYWOOD, FL 33023 US

Title: P
Name: RASHID, REHANNA
Address: 134 ESSEX RD
City-St-Zip: DAVIE, FL 33024 US

Title: T
Name: PIRONE, MARY JO
Address: 8300 SUNRISE LAKES BLVD, BLDF 55,#310
City-St-Zip: SUNRISE, FL 33322 US

Title: M
Name: SCHWARTZ, GARY S
Address: 428 NW 70TH AVE., APT. 138
City-St-Zip: PLANTATION, FL 33317 US

Title: M
Name: RUDINSKY, CAROL
Address: 9200 HOLLYBROOK LAKE DR #109
City-St-Zip: PEMBROKE PINES, FL 33025 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REHANNA RASHID

PRES

03/19/2010

Electronic Signature of Signing Officer or Director

Date