

05-01-2002 91565 004 \*\*\*150.00  
P00000079866

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

02 MAY -2 PM 12:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000079866

1. Entity Name

ABRC CORPORATION

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

4812 S. DIXIE HWY

Suite, Apt. #, etc.

3. Mailing Address

4812 S. DIXIE HWY

Suite, Apt. #, etc.

City & State

WEST PALM BEACH FL

City & State

WEST PALM BEACH FL

Zip

33405

Country

PBC

Zip

33405

Country

PBC

09-17-01 90009 030 \$150.00

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1034077

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

VIGNE, THOMAS J.

Street Address (P.O. Box Number is Not Acceptable)

3114 45TH STREET

City

WEST PALM BEACH

FL

Zip Code

33407

**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.

SIGNATURE

Signature typed or printed name of registered agent or director if applicable

NOTE: Registered Agent signature required when not submitted

DATE

9. This corporation is eligible to satisfy its intangible  
tax filing requirement and elects to do so.  
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CLIFFORD, BARRY R.  
441 32ND STREET  
WEST PALM BEACH FL 33407

TITLE  
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CITY-ST-ZIP

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13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with no other persons with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Herein

CR2E034B (12/01)

# Mark Escoffery, P.A.

Certified Public Accountant

4241-A Northlake Boulevard  
Palm Beach Gardens, FL 33410

Tel (561) 627-1404  
Fax (561) 627-3844

April 17, 2002

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE; ABRC CORPORATION

This letter is to advise that on downloading a Uniform Business Report (UBR) for my abovenamed Client (who did not receive one) I saw that his Company had been made inactive. This came as a surprise as he had paid the fee of \$150.00 and had returned the corrected Report with his FEI number within the thirty days of receipt. (Copy attached of both the corrected UBR and front and back of check #2726 in the amount of \$150.00).

He has now mailed his fee for 2002 and is requesting that you check the records again as you must have received his corrected form some time ago.

Thank you for your kind assistance in this matter.

Sincerely

  
Mark Escoffery

c.c: Department of State ✓