

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

02-11-2002 90190 040 ***150.00

DOCUMENT #	P00000092848
1. Entity Name	ABCO ENTERPRISES, INC. 9035 FLYNN CIRCLE #3 BOCA RATON FL 33496-2175

Principal Place of Business	Mailing Address
9035 FLYNN CIRCLE #3 BOCA RATON FL 33496	9035 FLYNN CIRCLE #3 BOCA RATON FL 33496

2. Principal Place of Business	3. Mailing Address
9035 FLYNN CIR Suite, Apt. #, etc. #3 City & State BOCA RATON FL Zip 33496 Country PALM BEACH	9035 FLYNN CIR Suite, Apt. #, etc. City & State Zip Country

4. FEI Number	59-186-4496	Applied For
		☐ Not Applicable
5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BARATTA, JOSEPH 9035 FLYNN CIRCLE #3 BOCA RATON FL 33496

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)	☐	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution.	☐	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	BARATTA, JOSEPH	NAME	
STREET ADDRESS	9035 FLYNN CIRCLE #3	STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33496	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

Joseph Baratta *Pri* 1-26-01 954-520-8175

Attachment

P00000092848

ABCO ENTERPRISES INC
9035 FLYNN CIR #3
BOCA RATON FL 33496

TO SEC OF STATE

I MAILED OUT THE
ORIGINAL TODAY AND FORGOT
TO PUT MY CHECK IN IT
FOR 150⁰⁰
PLEASE ACCEPT THIS

COPY THANK YOU.

Joe Baratta Jr.

IF NOT PLEASE CALL ME
954-520-8175
THANK YOU.