2005 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Jan 24, 2005 08:00 AM			
DOCUMENT # P01000042597 1. Entity Name ABCO HOLDINGS, INC.				Secretary of State			
Principal Piac 18767 BISC AVENTURA,		tailing Address 18767 BISCAYNE BLVD AVENTURA, FL 33180		- 			
DO NOT WRITE IN THIS SPAC				- 01042005 No Chg-P CR2E034 (10/03)			
				4. FEI Numbe 65-109 5. Certificate			Applied For Not Applicable Additional
<u></u>	6. Name and Address of Current Regis	itered Agent		or contineato		Fee Re	quired
2101 COR	GENTS, INC. PORATE BLVD STE 107 TON, FL 33431	A THE THE THE THE THE THE THE THE THE THE		NOT W THIS SP		,	
 The above the obligat SIGNATURE. 	named entity submits this statement for the p lons of registered agent.				h, in the State of Flor	Ida. I am familiar	with, and accept
	Signature, typed or printed name of registered agent and title	il applicable. (NOTE Registered	Agent signature required	when reinstating)		DATE	
FILE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution.				OO May Be			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIRES P COHEN, ABRAHAM 18767 BISCAYNE BLVD AVENTURA, FL 33180	JTOHS	97. T Högersprocessen som		Hinninn 	91028 10155-012	150.00
STREET ADDRESS CITY-ST-ZIP NTLE				76 · · · · · · · · · · · · · · · · · · ·		• • • • • •	to a second data
IAME STREET ADDRESS CITY-ST-ZIP	_ ···	<u> </u>	-•	NOT W			
ittle Kame Street address City-st-zip				IN 1	THIS SP	ACE	
ITLE JAME STREET ADDRESS CITY-ST-ZIP			1 · · · · · · · · · · · · · · · · · ·	,	~		
TTLE IAME STREET ADORESS STRY-ST-ZIP			12 7 7 7 3 9, * 20 2 7 7 7	<u></u>	<u> 2000 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995</u>		1
of the corr	sertify that the information supplied with this fill on this report or supplemental report is true a poration or the receiver or fustee empowered or on an attachment with an address, with all	to execute this report as require	nption stated in Sec are shall have the s ad by Chapter 607	ction 119.07(3)(i ame legal effect Florida Statutes), Florida Statutes. I i i as if made under oa s; and that my name	further certify that ath; that I am an of appears in Block	the information ficer or director 10 or Block 11 if
SIGNAT		NAME OF SIGNING OFFICER OR DIRECT	Jon 1'	7, 200	<u>5 305</u> Date	59324 Daytime Pho	1800.

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