2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000120279

Entity Name: ABBE, INC.

FILED Jan 17, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	/ERSITY BLV[IVILLE, FL 32:	O SOUTH BLDG C 216		
Current Mailing Address:			New Mailing Address:	
	/ERSITY BLV[IVILLE, FL 32:	O SOUTH BLDG C 216		
FEI Number	: 26-0001099	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
3636 UNIV	HILIP F DPM /ERSITY BLV[IVILLE, FL 32:	O SOUTH STE C 216 US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (BLEAU, CURTI 1824 BLANDIN JACKSONVILL	IG BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	BRONER, THO 1361 13TH AV		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D (ADLER, PHILIF) Delete P F	Title: Name:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: PHILIP ADLER D 01/17/2009

3636 UNIVERSITY BLVD S STE C

JACKSONVILLE, FL 32216

Address: City-St-Zip: