2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006786

Entity Name: ABRAHAM FINANCIAL, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8840 NORTH HIMES AVENUE 2815 E HENRY AVENUE TAMPA, FL 33614

SUITE B-4

TAMPA, FL 33610

Current Mailing Address: New Mailing Address:

8840 NORTH HIMES AVENUE 2815 E HENRY AVENUE SUITE B-4 TAMPA, FL 33614

TAMPA, FL 33610

FEI Number: 60-0001454 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:

MALOUF, JASON MALOUF, JASON 8840 NORTH HIMES AVENUE 2815 E HÉNRY AVENUE TAMPA, FL 33614 SUITE B-4 TAMPA, FL 33610 US

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: JASON MALOUF 04/30/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition MALOUF, JASON Name: Name: MALOUF, JASON

8840 NORTH HIMES AVENUE 2815 E HENRY AVENUE SUITE B-4 Address:

Title:

City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33610

Title: VD Title: VD () Delete (X) Change () Addition

MALOUF, ALLISON Name: MALOUF, ALLISON Name:

8840 NORTH HIMES AVENUE Address: 2815 E HENRY AVENUE SUITE B-4 Address:

TAMPA, FL 33614 TAMPA, FL 33610 City-St-Zip: City-St-Zip:

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.

SIGNATURE: JASON MALOUF PD 04/30/2007

Electronic Signature of Signing Officer or Director

Date