

# FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

ABC ACADEMY DEVELOPMENT CENTER, INC.  
DOCUMENT No. P02000107494



FILED

04 JAN -9 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
17105 SW 49th Place

3. Mailing Address  
17105 SW 49th Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

REINSTATEMENT  
DO NOT WRITE IN THIS SPACE

City & State  
Miramar, FL

City & State  
Miramar, FL

4. FEI Number

161637503

Applied For  
Not Applicable

Zip  
33027

Country  
USA

Zip  
33027

Country  
USA

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name VALISSA SAMUELS

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

17105 SW 49th Place

City Miramar

FL

Zip Code  
33027

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President/Director  
VALISSA SAMUELS  
17105 SW 49TH Place  
Miramar, FL 33027

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
300026606183  
01/09/04--01048--004 \*\*150.00

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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/03 954-966-9800  
Date Daytime Phone #

CR2E034B (12/02)

ABC ACADEMY DEVELOPMENT CENTER, INC.  
17105 SW 49<sup>TH</sup> Place  
Miramar, FL 33027

December 30, 2003

Florida Department of State  
Division of Corporations  
Uniform Business Report  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: ABC ACADEMY DEVELOPMENT CENTER, INC.  
ANNUAL REPORT

To Whom It May Concern:

I am the President of ABC Academy Development Center, Inc.,

It has come to my attention that the above corporation has been dissolved for failure to file an annual report.

Please be advised that I filed my incorporation documents on 10/07/2002 and did not receive the annual report form for year 2003.

I am enclosing the completed and signed year 2003 annual report along with the filing fee in the amount of \$150.00 to cover the cost of the filing. Would you please file this annual report at your earliest convenience.

Would you also please confirm my address as 11705 SW 49<sup>th</sup> Place, Miramar, FL 33027.

Thank you for your assistance in this matter.

Sincerely,

ABC ACADEMY DEVELOPMENT CENTER, INC

BY

  
VALISSA SAMUELS