## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000052282

Entity Name: ABS ALL BUSINESS SUPPLY'S, INC.

8695 NW 6TH LANE, APT 206

MIAMI, FL 33126

Address:

City-St-Zip:

FILED Mar 18, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8695 NW 6TH LANE **APT 206** MIAMI, FL 33126 **Current Mailing Address: New Mailing Address:** 8695 NW 6TH LANE APT 206 MIAMI, FL 33126 FEI Number: 86-1062900 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: CASASBUENAS, ENRIQUE 8695 NW 6TH LŃ APT. 206 MIAMI, FL 33126 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition CASASBUENAS, ENRIQUE Name: Name: 8695 NW 6TH LANE APT. 206 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: Title: () Delete Title: () Change () Addition VIVIANI, ROSANA B Name: Name:

Address:

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: ENRIQUE CASASBUENAS P 03/18/2009