

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077999

FILED
Feb 08, 2007
Secretary of State

Entity Name: ABACUS INSTRUMENTS, INC.

Current Principal Place of Business:

4625 N. MANHATTAN AVE., E
TAMPA, FL 33614

New Principal Place of Business:

4625 N. MANHATTAN AVE.
E
TAMPA, FL 33614

Current Mailing Address:

4625 N. MANHATTAN AVE., E
TAMPA, FL 33614

New Mailing Address:

4625 N. MANHATTAN AVE.
E
TAMPA, FL 33614

FEI Number: 20-0488209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANEY & GORDON, P.A.
101 EAST KENNEDY BOULEVARD
SUITE 3170
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: JONES, GARETH S
Address: 16209 HOYLAKE DR.
City-St-Zip: ODESSA, FL 33556

Title: T () Delete
Name: JONES, GARETH S
Address: 16209 HOYLAKE DR.
City-St-Zip: ODESSA, FL 33556

Title: VP () Delete
Name: BRATT, CLIVE
Address: 16209 HOYLAKE DR.
City-St-Zip: ODESSA, FL 33556

Title: S () Delete
Name: JONES, HANNAH Z
Address: 16209 HOYLAKE DR.
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GARETH JONES

P

02/08/2007

Electronic Signature of Signing Officer or Director

Date