

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090814

FILED
Feb 07, 2006
Secretary of State

Entity Name: ABC AFFORDABLE BUILDING CONTRACTORS, INC.

Current Principal Place of Business:

1 CORPORATE DR SUITE 1A
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

1 CORPORATE DR SUITE 1A
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 20-0147995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAAM, BIBI A
1 CORPORATE DR SUITE 1A
PALM COAST, FL 32137 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: ST () Delete
Name: SALAAM, BIBI A
Address: 1 CORPORATE DR SUITE 1A
City-St-Zip: PALM COAST, FL 32137

Title: VP () Delete
Name: SALAAM, AMANDA
Address: 1 CORPORATE DR SUITE 1A
City-St-Zip: PALM COAST, FL 32137

Title: VP () Delete
Name: SALAAM, MATTHEW
Address: 1 CORPORATE DR SUITE 1A
City-St-Zip: PALM COAST, FL 32137

Title: P () Delete
Name: SALAAM, MOHAMED B
Address: 1 CORPORATE DR SUITE 1A
City-St-Zip: PALM COAST, FL 32137

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: VP () Change (X) Addition
Name: RAMKELLAWAN, INSHAAN A
Address: 1 CORPORATE DR SUITE 1A
City-St-Zip: PALM COAST, FL 32137

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: BIBI A SALAAM

ST

02/07/2006

Electronic Signature of Signing Officer or Director

_____ Date