## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 28, 2004 8:00 am Secretary of State

DOCUMENT # P03000111727  1. Entity Name AB SELECTIONS, INC.								04-28-2004		38 ***150	0.00	
Principal Place of Business Mailing Address						<del></del>	1	1400981	3			
16551 95TH Jupiter, Fl	I AVENUE N	1655	16551 95TH AVENUE N JUPITER, FL 33478									
2. Principal P	Tace of Busin	ness	3. Mailir	ng Address								
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.			04262004	Chg-P		4 (10/03)		
, City & Stat	e		City 8	& State		4. FEI Numbe	686645	-		plied For Applicable		
Zip	Country		Zip			etry		of Status Desired	<u> </u>	8.75 Add ee Required		
	6. Name	and Address of Currer	nt Registered	1 Agent		L	7. Name and	Address of New Re	egistered A	gent		
CLATED	n/OCCST:					Name .						
SLATER, ROBERT W 214 BRAZILIAN AVENUE #260 PALM BEACH, FL 33480						Street Address (P.O. Box Number is Not Acceptable)						
			ب میستم		:	- ~		وهانداج بسيد	<u> </u>		C. ***	
						City			FL	Zip Code	3	
8. The above named entity submost 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 refine of registered agent and title of approache. (NOTE: Registered Agent signature required when renstraing)  OATE												
FIL After M:	E NOW!!! ay 1, 200	FEE 18 \$150.00 4 Fee will be \$550	ncing \$5	.00 May Be led to Fees								
10.	10. OFFICERS AND DIRECTO				ECTORS 11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
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	certify that th	e information sumulied w	ith this filing	does not quality to			ection 119 07/3V	). Florida Statutes 1	further certi	fv that the in	formation	
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 cath; 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.												

CICMATUDE

SCHATURE AND TYPED ON PRINTED MAKES OF SIGNING OFFICER OR DIRECTOR

4/26/04

561-262-0785