
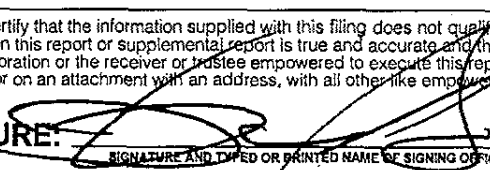


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000141838		
1. Entity Name ABITINO, INC.		
Principal Place of Business 2330 N. WICKHAM RD., SUITE 15 MELBOURNE, FL 32955	Mailing Address 2330 N. WICKHAM RD., SUITE 15 MELBOURNE, FL 32955	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ABITINO, DOMENIC 2330 N. WICKHAM RD., SUITE 15 MELBOURNE, FL 32955		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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		U00000545356 05/11/06-80069-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABITINO, DOMENIC 321 OCEANVIEW LANE INDIALANTIC, FL 32903	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: 		4/27/06 (321) 255-3123
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #