


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 02, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000002150</b> 1. Entity Name ABBA COMPUTER SYSTEMS INC	
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Principal Place of Business 8720 SW HWY. 200, #5 OCALA, FL 34481	Mailing Address 8720 SW HWY. 200, #5 OCALA, FL 34481
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01262006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 74-3112803	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  VOISINET, ANTHONY V 8720 SW HWY. 200, #5 OCALA, FL 34481
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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: <i>Anthony V Voisinet Jr</i> <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE: <u>1-30-06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD VOISINET, ANTHONY V 8720 SW HWY. 200, #5 OCALA, FL 34481
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD MCDANIEL, CARLA 8720 SW HWY. 200, #5 OCALA, FL 34481
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02/11/06-80088-009 150.00

**DO NOT WRITE IN THIS SPACE**

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: <i>Carla McDaniel</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE: <u>1-30-06</u> <small>Daytime Phone #</small>