2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000035453

Entity Name: ABC GENERAL SERVICES, INC.

FILED Aug 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1675 NW 4TH AVE 15296 BRIARCREST CIRCLE FORT MYERS, FL 33912 US

BOCA RATON, FL 33432 US

Current Mailing Address: New Mailing Address:

1675 NW 4TH AVE 15296 BRIARCREST CIRCLE FORT MYERS, FL 33912 US

BOCA RATON, FL 33432 US

FEI Number: 20-0771171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANCHES, ROSANGELA

1675 NW 4TH AVE

103

BOCA RATON, FL 33432 US

ABREU, SILVIO

15296 BRIARCREST CIRCLE
FORT MYERS, FL 33912 U

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: SILVIO ABREU 08/29/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: SANCHES, ROSANGELA Name: ABREU, SILVIO
Address: 1675 NW 4TH AVE/103 Address: 15296 BRIARCREST CIRCLE

Address: 1675 NW 41H AVE/103 Address: 15296 BRIARCREST CIRCLE
City-St-Zip: BOCA RATON, FL 33432 US City-St-Zip: FORT MYERS, FL 33912 US

Title: V () Delete Title: V (X) Change () Addition

 Name:
 GOMES, GOMES L
 Name:
 SOARES, JOAO

 Address:
 12 VERNON STREET
 Address:
 2343 WINKLER AVE APTO M 105

City-St-Zip: HARTFORD, CT 08816 US City-St-Zip: FORT MYERS, FL 33901 US

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 SANCHES, ROSANGELA

 Address:
 Address:
 31 JOSEPH STREET

 City-St-Zip:
 City-St-Zip:
 SOUTH RIVER, NJ 08882

I hereby certify that the information supplied with this filing does not qualify 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: SILVIO ABREU P 08/29/2009