

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000061834				
1. Entity Name AB HOUSING, INC.				
Principal Place of Business 10111 CLUBHOUSE TURN ROAD LAKE WORTH, FL 33467	Mailing Address 10111 CLUBHOUSE TURN ROAD LAKE WORTH, FL 33467			
DO NOT WRITE IN THIS SPACE		 07072006 No Chg-P CR2E034 (11/05)		
		4. FEI Number 34-1988998 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 BOTTO, JOSEPH 10111 CLUBHOUSE TURN ROAD LAKE WORTH, FL 33467		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE _____				
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE 000000569297 07/11/06-80019-021 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOTTO, JOSEPH 10111 CLUBHOUSE TURN ROAD LAKE WORTH, FL			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO BOTTO, YANILKA 10111 CLUBHOUSE TURN RD LAKE WORTH, FL 33467			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 		7-7-06 954 4443374 Date Daytime Phone #		