

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000078649

1. Entity Name
AMERICAN BUSINESS MANAGEMENT INC.



Principal Place of Business
5301 N. FEDERAL HIGHWAY
BOCA RATON, FL 33487

Mailing Address
5301 N. FEDERAL HIGHWAY
BOCA RATON, FL 33487

DO NOT WRITE IN THIS SPACE

FILED
May 03, 2006 08:00 AM
Secretary of State



04272006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1810196	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KAISER, GERALD
SUITE 360
5301 N. FEDERAL HIGHWAY
BOCA RATON, FL 33487

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KAISER, GERALD 5301 N. FEDERAL HIGHWAY, SUITE 360 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

0000000560503
05/18/06 80042-014 150.00

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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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/06

Date

Daytime Phone #