2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080922

Entity Name: ABNI'S ELECTRICAL & LIGHTING SUPPLY INC.

FILED Jul 07, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	V. 57TH AVE. RDENS, FL 3	3014			
Current Mailing Address:			New Mailing Address:		
	V. 57TH AVE. RDENS, FL 3	3014			
FEI Number	: 16-1739206	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
GONZALE P.O BOX HIALEAH,	170634	US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
		03(2)(b), F.S., the corporation did n g Trust Fund Contribution().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GONZALEZ, ÌS	E BOX 170634	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (GONZALEZ, IS P.O BOX 1706 HIALEAH, FL	34	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (GONZALEZ, IS P.O BOX 1700 HIALEAH, FL	334	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ISIS GONZALEZ P 07/07/2008