2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000090437

BAXTER, WILLIAM

BAXTER, ALMA

BAXTER, ALMA

SEC

TREA

POST OFFICE BOX 2544

HONOLULU, HA 96825 US

17335 35TH PLACE NORTH

17335 35TH PLACE NORTH

LOXAHATCHEE, FL 33470 US

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Name:

Title:

Title:

Name:

Address:

Name:

Address: City-St-Zip:

Address:

City-St-Zip:

Entity Name: ALABEE INC.

FILED Apr 29, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
17335 - 35TH PLACE NORTH LOXAHATCHEE, FL 33470				1210 WOODYCREST AVENUE 2C			
			BRONX, NY 10452				
Current Mailing Address:				New Mailing Address:			
17335 - 35TH PLACE NORTH LOXAHATCHEE, FL 33470				1210 WOODYCREST, AVENUE 2C			
				BRONX, NY 10452			
FEI Number:	34-1999586	FEI Number Applied For ()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MYRIUM CAESAR 2181 NORTH WEST 21 TERRACE FORT LAUDRDALE, FL 33311 US				CAESAR, MYRIUM 2181 NORTH WEST 21 TERRACE FORT LAUDRDALE, FL 33311 US			
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: MYRIUM CAESAR				04/29/2006			
	Elect	ronic Signature of Registered	Agent			Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITION	S/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		()Delete LMA I PALCE NORTH HEE, FL 33470 US		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	VP	() Delete		Title:	VP	(X) Change () Addition	

Name:

Title:

Title:

Name:

Address:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

BAXTER, WILLIAM

MCKOY, DEBORAH

BAXTER, ALMA

BRONX, NY 10452 US

SEC

TREA

1168 KAELEKU STREET HONOLULU, HA 96825 US

1210 WOODYCREST AVENUE

1210 WOODYCREST AVENUE

(X) Change () Addition

(X) Change () Addition

City-St-Zip: LOXAHATCHEE, FL 33470 US City-St-Zip: BRONX, NY 10452 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ALMA BAXTER CEO 04/29/2006