## 2007 FOR PROFIT CORPORATION

## FILED **ANNUAL REPORT** Feb 26, 2007 08:00 AM **DOCUMENT # P05000011662 Secretary of State** 1. Entity Name ABC GLOBAL NETWORK, CORP. Principal Place of Business Mailing Address 11173 NW 67 ST 11173 NW 67 ST MIAMI, FL 33178 MIAMI, FL 33178 02222007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 20-2222748 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORRERA, FERNANDO C DO NOT WRITE 11173 NW 67 ST MIAMI, FL 33178 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE CORREA, FERNANDO C NAME STREET ADDRESS 11173 NW 67 ST CITY-ST-ZIP MIAMI, FL 33178 TITLE NAME U00000647028 STREET ADDRESS 03/06/07-80056-001 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 feceiver or trustes 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: (x

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP