

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034346

FILED
May 10, 2007
Secretary of State

Entity Name: AMERICAN BUSINESS CONSULTING, INC.

Current Principal Place of Business:

832 CINCY ST
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

WETTERNWEG 23
GUDERHANDVIERTEL, GERMANY, GE 21720

New Mailing Address:

FEI Number: 20-2774143 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GARRN, LISA A
Address: 832 CINCY ST.
City-St-Zip: VENICE, FL 34285

Title: VP () Delete
Name: GARRN, RALF J
Address: 832 CINCY ST.
City-St-Zip: VENICE, FL 34285

Title: S () Delete
Name: DANDO, KENNETH R
Address: 505 N. 40TH ST.
City-St-Zip: ALLENTOWN, PA 18104

Title: T () Delete
Name: GARRN, RALF
Address: 832 CINCY ST.
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LISA A. GARRN

DP

05/10/2007

Electronic Signature of Signing Officer or Director

_____ Date