2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P05000045325

FILED Feb 01, 2007 08:00 AM Secretary of State

WIGS BY ABBY, INC Principal Place of Business

1. Entity Name

Mailing Address

10500 ULMERTON RD SUITE 706 LARGO, FL 33771

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DO NOT WRITE IN THIS SPACE

01042007 CR2E034 (11/05) No Chg-P

4. FEI Number	Applied For
20-2705353	 Not Applicab
5. Certificate of Status Desired	\$8.75 Additional

6. Name and Address of Current Registered Agent

NEUMANN, JAMES W JR 19823 GULF BLVD #13 INDIAN SHORES, FL 33785

DO NOT WRITE IN THIS SPACE

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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, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees	U00000615468 Д2/06/07-80071-022 150.00				
10.	OFFICERS AND DIREC	TORS						
NAME STREET ADDRESS CHY-ST-ZIP	PS NEUMANN, JAMES W JR 19823 GULF BLVD #13 INDIAN SHORES, FL 33785			·	•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT NEUMANN, GAIL 19823 GULF BLVD #13 INDIAN SHORES, FL 33785				•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	:		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE			
NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME , STREET ADDRESS CITY-ST-ZIP								
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								

of the corporation or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 all other like empowered. 727-501- 2447 1.31.07 SIGNATURE: