

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000134601

FILED
Apr 30, 2008
Secretary of State

Entity Name: ABOUND NET, INC.

Current Principal Place of Business:

18851 NE 29 AVENUE
SUITE 1011
AVENTURA, FL 33180 US

Current Mailing Address:

18851 NE 29 AVENUE
SUITE 1011
AVENTURA, FL 33180 US

New Principal Place of Business:

2800 W STATE ROAD 84
SUITE 118
FORT LAUDERDALE, FL 33312 US

New Mailing Address:

2800 W STATE ROAD 84
SUITE 118
FORT LAUDERDALE, FL 33312 US

FEI Number: 20-3572115 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1100 SOUTH FEDERAL HWY
2ND FLOOR
DEERFIELD BEACH, FL 33442 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: RAMOS, MARCELO M
Address: 993 HARBOR VIEW NORTH
City-St-Zip: HOLLYWOOD, FL 33019 US

Title: VP () Delete
Name: RAMOS, FLAVIA L
Address: 993 HARBOR VIEW NORTH
City-St-Zip: HOLLYWOOD, FL 33019 US

Title: VP () Delete
Name: BARROS, LUIS ALBERTO V
Address: RUA DESENHISTA LUIZ GUIMARAES, 260
City-St-Zip: RIO DE JANEIRO, RJ 22793-260 BR

Title: VP () Delete
Name: LANNES, ANTONIO TADEU L
Address: 5511 BUTTERNUT CIRCLE
City-St-Zip: MINNETONKA, MN 55343 US

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: MARCELO M RAMOS

PST

04/30/2008

Electronic Signature of Signing Officer or Director

Date