

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000002313

Entity Name: ABBOUD, INC.

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

2332 GALIANO ST  
#105  
CORAL GABLES, FL 33134

## **New Principal Place of Business:**

121 ALHAMBRA PLAZA  
#1500  
CORAL GABLES, FL 33134

## **Current Mailing Address:**

2332 GALIANO ST  
#105  
CORAL GABLES, FL 33134

## **New Mailing Address:**

121 ALHAMBRA PLAZA  
#1500  
CORAL GABLES, FL 33134

FEI Number: 26-0133956

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

ABBOUD, BRYAN  
2332 GALIANO ST  
#105  
CORAL GABLES, FL 33134 US

## **Name and Address of New Registered Agent:**

ABBOUD, BRYAN  
121 ALHAMBRA PLAZA  
#1500  
CORAL GABLES, FL 33134 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: BRYAN ABBOUD

01/13/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: MD  
Name: ABBOUD, BRYAN  
Address: 121 ALHAMBRA PLAZA #1500  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: BRYAN ABBOUD

MD

01/13/2012

Electronic Signature of Signing Officer or Director

Date