

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000040237

Entity Name: ABD AMERICA CORP

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

5950 LAKEHURST DR  
STE 169  
ORLANDO, FL 32819

## New Principal Place of Business:

5950 LAKEHURST DR  
STE 169  
ORLANDO, FL 32819

## New Mailing Address:

FEI Number: 20-8757592      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP  
5950 LAKEHURST DR  
STE 246  
ORLANDO, FL 32819 US

## Name and Address of New Registered Agent:

SAFETY BUSINESS INC  
6220 S. ORANGE BLOSSOM TRAIL  
STE 603  
ORLANDO, FL 32809 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: SEVERINA C. RIVERA

04/29/2008

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DAVID, HERIC  
Address: 5950 LAKEHURST DR STE 169  
City-St-Zip: ORLANDO, FL 32819

Title: VP ( ) Delete  
Name: DAVID, MARCIO  
Address: 5950 LAKEHURST DR STE 169  
City-St-Zip: ORLANDO, FL 32819

Title: T ( ) Delete  
Name: DAVID, MARTA D  
Address: 5950 LAKEHURST DR STE 169  
City-St-Zip: ORLANDO, FL 32819

Title: S ( ) Delete  
Name: DAVID, MARISA N  
Address: 5950 LAKEHURST DR STE 169  
City-St-Zip: ORLANDO, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: DAVID, MARCIO  
Address: 3236 HERONS POINT CIR  
City-St-Zip: KISSIMMEE, FL 34741

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: HERIC DAVID

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date