FILED
Mar 20, 2008 8:00 am
Secretary of State
03-20-2008 90172 001 ***150.00
03-20-2008 90172 002 *****8.75

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P07000093066

1. Entity Name
ABMB INVESTMENTS, INC.

Principal Place of Business
1211 CASTILE AVE.
CORAL GABLES, FL 33134

Mailing Address
C/O IVAN A. GOMEZ, P.A., 601 BRICKELL KEY DR., STE. 507
MIAMI, FL 33131

03122008 Chg-P CR2E034 (12/06)

2. Principal Place of Business No P.O. Box #

3. Mailing Address
~~1211 Castile Ave.~~
Suite, Apt. #, etc.
City & State
~~Coral Gables, FL~~
Zip 33134 Country U.S.A.

4. FEI Number 26-1223783 Applied For / Not Applicable

5. Certificate of Status Desired X $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
IAG CORPORATE SERVICES, INC.
601 BRICKELL KEY DR., STE. 507
MIAMI, FL 33131

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 ______

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
D	BARDINA, ABIMAIDE C.	1211 CASTILE AVE.	CORAL GABLES, FL 33134	X Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
DP	Maria Bardina Farah	1211 Castile Avenue	Coral Gables, Florida 33134	☐	XX
DST	Abimaide Bardina Dominguez	1211 Castile Avenue	Coral Gables, Florida 33134	☐	XX
				☐	☐
				☐	☐
				☐	☐
				☐	☐

12. I hereby certify that the information ... 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Maria Bardina Farah, President 3.18.08 305-371-9213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR