2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 18, 2008 8:00 am Secretary of State

| DOCUMENT # P07000135246 1. Entity Name ABL CONSULTING, INC. | | | | | | | | 05-05-2008 | 3 90250 | 005 *** | 150.00 |
|---|----------------------------------|--------------------------------------|------------------|---|---|---|---------------------------|---------------------------------------|--------------------------------|------------------------------------|--|
| Principal Place | e of Business | 5 | Ma | ailing Address | | | 1. | | | | |
| 3405 BENT F FT. PIERCE, F | | US | | 405 BENT PINE DR. T. PIERCE, FL. 34951 | us us | , , | | 014379 | | | |
| 2. Principal P | tace of Busin | sess - No P.O. Box# | 3. 1 | Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | N BANT MAN MAN MAN MAN | | IITO NEN OTOTO A | (3(00) 1 1 (01) |
| | | | | | | | 04222008 | Chg-P | CR2E0 | 34 (12/06) | <u>_</u> |
| City & State | | | | City & State | | | 4. FEI Numb | 1639053 | 3 | | pplied For ot Applicable |
| Zip | | Country | 7 | Zip | Coun | lry | 5. Certificate | ol Status Desired | | \$8.75 Adi | ditional ed |
| · | 6. Name | and Address of Cur | rent Regist | tered Agent | | | 7. Name and | Address of New R | | | |
| LINDLEY, | ANNE | - | | | | Name | | | | | |
| 3405 BENT PINE DR. FT. PIERCE, FL. 34951 | | | | | | Street Address (| P.O. Box Numb | er is Not Acceptable | e) | | |
| | | | | | | | | | | | |
| | | | | | | City | • | | FL | Zip Cod | 8 |
| | named entiti | | ont for the p | urpose of changing its | registere | d office or register | red agent, or bo | oth, in the State of Fic | orida. I am f | famillar with, | and accept |
| SIGNATURE | • . | | | | | | | | | | |
| | | or priviled name of registered | agent and sile f | applicable, (NOT | E: Registered | d Agent signature required | s when rendering) | · · · · · · · · · · · · · · · · · · · | DATE | | |
| FIL After Ma | E NOW!!! ay 1, 200 | FEE IS \$150.00 8 Fee will be \$5 | 50.00 | Election Campa Trust Fund Cont | | | .00 May Be led to Fees | | | | |
| 10. | · | OFFICERS A | AND DIREC | | 11. | | ADDITIONS | /CHANGES TO OFF | ICERS AND | | S IN 11 |
| | | | | | | . 1 | | | | ☐ Change | |
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