

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000086226

Entity Name: ABANDO, INC.

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

911 SOUTH VOLUSIA AVE  
ORANGE CITY, FL 32763 US

## New Principal Place of Business:

## Current Mailing Address:

911 SOUTH VOLUSIA AVE  
ORANGE CITY, FL 32763 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ABDALLAH, SUFIAN  
5942 DORAVILLE DRIVE  
PORT ORANGE, FL 32127 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: P ( ) Delete  
Name: ABDALLAH, SUFIAN  
Address: 5942 DORAVILLE DRIVE  
City-St-Zip: PORT ORANGE, FL 32127 US

Title: VP ( ) Delete  
Name: ORLANDO, JAMES F  
Address: 43 GENERAL DOOLITTLE ROAD  
City-St-Zip: DAYTONA BEACH, FL 32124 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SUFIAN ABDALLAH

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date