## P09000028035

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Danish and Nisrahan)
(Document Number)
·
Certified Copies Certificates of Status
•
Special Instructions to Filing Officer:
Special instructions to 1 ling Officer.





200148223632

04/02/09--01022--012 \*\*35.00

Art & Cou

09 APR -2 AM 10: 04

SECRETARY OF STATE
DIVISION OF CORPORATION

17/1/6/09

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: ABA CONSTRUCTION SERVICES, INC		
(Name of Corporation)  DOCUMENT NUMBER: P09000028035		
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
TIBASIME ELIAS		
(Name of Contact Person)		
ABA CONSTRUCTION SERVICES, INC  (Firm/Company)		
PMB 320, 1631 ROCK SPRING RD  (Address)		
APOPKA, FL 32712		
(City/State and Zip Code)  For further information concerning this matter, please call:		
TIBASIME ELIAS	at ( 407 ) 285 4707  (Area Code & Daytime Telephone Number)	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
<b>✓</b> \$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status	
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF CORRECTION

for



Pho.

## ABA CONSTRUCTION SERVICES, INC

Name of Corporation as currently filed with the Florida Dept. of State

P09000028035  Document Number (if known)
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.  These articles of correction correct ALL ADDRESSES, INCLUDING OFFICER& RA.  (Document Type Being Corrected)  filed with the Department of State on 03/27/09  (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect: 3905 OLD DUNN ROAD, APOPKA FL 32712 - PRINCIPAL ADDRESS
3905 OLD DUNN ROAD, APOPKA FL 32712 - MAILING ADDRESS
3905 OLD DUNN ROAD, APOPKA FL 32712 - REGISTERED AGENT
3905 OLD DUNN ROAD, APOPKA FL 32712 - OFFICER
Correct the inaccuracy, incorrect statement, or defect: PMB 320, 1631 ROCK SPRING RD, APOPKA FL 32712 - PRINCIPAL ADDRESS
PMB 320, 1631 ROCK SPRING RD, APOPKA FL 32712 -MAILING ADDRESS
PMB 320, 1631 ROCK SPRING RD, APOPKA FL 32712 - REG. AGENT ADDRESS
PMB 320, 1631 ROCK SPRING RD, APOPKA FL 32712 - OFFICER ADDRESS
(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

**TIBASIME ELIAS** 

**PRESIDENT** 

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00