## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P93000024562

1. Entity Name

ABEDON & ABEDON, INC.



FILED
Jan 18, 2007 08:00 AM
Secretary of State

Principal Place of Business

12904 MIZNER WAY WELLINGTON, FL 33414 Mailing Address

12904 MIZNER WAY WELLINGTON, FL 33414



DO NOT WRITE IN THIS SPACE

01102007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0399328

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABEDON, ROBIN G 12904 MIZNER WAY WELLINGTON, FL 33414

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the ptions of registered agent.	ourpose of changing its register	ed office or r	egistered agent, or b	oth, in the State of Florida I am familiar with, and accept
SIGNATURE				e required when reinstating)	DATE:
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.			ncing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ABEDON, RICHARD L 12904 MIZNER WAY WELLINGTON, FL 33414				U00000591775 01/19/07-80037-006 150.00
TITLE NAME STREET ADDRESS CITY+S1-ZIP	PSD ABEDON, ROBIN G 12904 MIZNER WAY WELLINGTON, FL 33414				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

Richaeo L Abedon

1/12/07

5617905421

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