## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000076336

1. Entity Name

ABACUS BUSINESS SOLUTIONS, INC.



Principal Place of Business

Mailing Address

15301 ROOSEVELT BLVD., STE 303 CLEARWATER, FL 33760 US 15301 ROOSEVELT BLVD., STE 303 CLEARWATER, FL 33760 US FILED
Mar 26, 2007 08:00 AM
Secretary of State



03152007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3217824

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PETERSON, RICHARD C 15301 ROOSEVELT BLVD., STE 303 CLEARWATER, FL 33760

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	e named entity submits this statement for the plions of registered agent.	purpose of changing its registere	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and life	if applicable (NOTE: Registered	d Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	ľ	· · · · - ·-·	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PETERSON, RICHARD C 7128 HIDEAWAY TRAIL NEW PORT RICHEY, FL 34655				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PETERSON, DEBRA J 7128 HIDEAWAY TRAIL NEW PORT RICHEY, FL 34655				U00000679938 04/03/07-80057-014 158.75
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 suppliemental 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 of turstee 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 OF STRATED WANTE OF SIGNING OFFICER OR DIRECTOR

316/07

(727)524-0177