## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000059025

Entity Name: ABBOTT INVESTMENTS, INC.

FILED Jan 19, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

999 WASHINGTON AVE. 999 WASHINGTON AVENUE MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

**Current Mailing Address: New Mailing Address:** 

999 WASHINGTON AVENUE 999 WASHINGTON AVE MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

FEI Number: 65-0510554 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GALBUT, ABRAHAM A GALBUT, ABRAHAM A 999 WASHINGTON AVENUE 999 WASHINGTON AVENUE MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

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: ABRAHAM A GALBUT 01/19/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete GALBUT, ABRAHAM A. Name: 999 WASHINGTON AVENUE

MIAMI BEACH, FL City-St-Zip:

Address:

Title: VSTD () Delete GALBUT, RUSSELL W Name: 5225 COLLINS AVE Address: MB, FL 33140 City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition GALBUT, ABRAHAM A Name:

999 WASHINGTON AVENUE Address: City-St-Zip: MIAMI BEACH, FL 33139

Title: VSTD (X) Change ( ) Addition

Name: GALBUT, RUSSELL W Address: 999 WASHINGTON AVENUE MIAMI BEACH, FL 33139 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ABRAHAM A GALBUT PD 01/19/2005