

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000059025

Entity Name: ABBOTT INVESTMENTS, INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

4770 BISCAYNE BLVD.
400
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

4770 BISCAYNE BLVD.
400
MIAMI, FL 33137

New Mailing Address:

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

Name and Address of Current Registered Agent:

GALBUT, ABRAHAM A
4770 BISCAYNE BLVD.
400
MIAMI, FL 33137 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: D () Delete
Name: GALBUT, ABRAHAM A
Address: 4770 BISCAYNE BLVD.,400
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: GALBUT, RUSSELL W
Address: 4770 BISCAYNE BLVD.,400
City-St-Zip: MIAMI, FL 33137

Title: P () Delete
Name: MENIN, KEITH
Address: 1745 JAMES AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: MENIN, KEITH
Address: 1745 JAMES AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: S,T () Delete
Name: MENIN, KEITH
Address: 1745 JAMES AVE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ABRAHAM A. GALBUT

DIR

04/24/2007

Electronic Signature of Signing Officer or Director

Date