


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90229 040 \*\*\*150.00

|  |  |     |   |  |   |
|--|--|-----|---|--|---|
| <b>DOCUMENT # P95000034081</b><br>1. Entity Name<br><b>A-ABRAM &amp; SON BUILDING INSPECTION INC.</b>  |  |     |   |   |   |
| Principal Place of Business<br><b>PO BOX 848252<br/>HOLLYWOOD FL 33084<br/>US</b>  |  |     | Mailing Address<br><b>PO BOX 848252<br/>HOLLYWOOD FL 33084<br/>US</b> |  |   |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.  |  |     | 3. Mailing Address<br>Suite, Apt. #, etc.                             |  |   |
| City & State   |  |     | City & State  |  |   |
| Zip  | Country  | Zip | Country   | 4. FEI Number <b>65-0584329</b> <div style="float: right;"> <input type="checkbox"/> Applied For<br/> <input type="checkbox"/> Not Applicable         </div>                     |   |
| 6. Name and Address of Current Registered Agent<br><br><b>PRISKULNIK, HENRY<br/>11685 BERRY DRIVE<br/>HOLLYWOOD FL 33026</b>   |  |     |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;"><b>FL</b> Zip Code         </span> |   |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br>SIGNATURE <u><i>Henry Priskulnik</i></u> <span style="float: right;"><b>2-23-06</b></span><br><small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-stating) DATE</small> |  |     |   |  |   |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2006 Fee Will Be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b>  |  |     |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>   |   |
| 10. OFFICERS AND DIRECTORS   |  |     |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | D PRISKULNIK, HENRY <input checked="" type="checkbox"/> Delete<br>117 E SHERIDAN ST., SUITE 148 <b>11685 BERRY DR</b><br>DANIA FL <b>AWD, FL 33026</b> |     |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete  |     |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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1st MOORE CR2E034 (10/05)

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Henry Priskulnik* **henry Priskulnik 954-443 6608**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #