

FILE NO. FILING FEE AFTER MAY 1 IS \$225.00

PRO
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000054653 (7)

1. Corporation Name

A.B.S. FINANCE INC.



Principal Place of Business

Mailing Address

10715 SW 104TH STREET
MIAMI FL

10715 SW 104TH STREET
MIAMI FL

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

8. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/20/1995

3a. Date of Last Report

4. FEI Number

65-0599970

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

KURZBAN, MARVIN
2650 SW 27TH AVENUE
MIAMI FL

81 Name

BURT O'DONALD

82 Street Address (P.O. Box Number is Not Acceptable)

ABS FINANCE, INC.

83

10715 SW 104 ST

84 City

MIAMI

FL

85 Zip Code

33176

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when rotating)

Date

Burt O'Donald

3/13/96

12. OFFICERS AND DIRECTORS

TITLE

D
COHEN, SANFORD
10715 SW 104TH STREET
MIAMI FL

☐ DELETE

TITLE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
CITY - ST - ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P-PRESIDENT

12 NAME

O'DONALD, BURTON

13 STREET ADDRESS

10715 SW 104 ST

14 CITY - ST - ZIP

MIAMI, FL 33176

2.1 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3.1 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4.1 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5.1 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6.1 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☒ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Burt O'Donald

3/13/96

4-12-96
JR

CR2E034 (12/95)