

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000055724

FILED
Mar 27, 2002 8:00 AM
Secretary of State

Entity Name: ABERCROMBIE ACCOUNTING, INC.

Current Principal Place of Business:

16115 SW 117TH AVENUE STE 25
MIAMI, FL 33177

New Principal Place of Business:

16115 SW 117TH AVENUE
SUITE 25
MIAMI, FL 33177

Current Mailing Address:

16115 SW 117TH AVENUE STE 25
MIAMI, FL 33177

New Mailing Address:

16115 SW 117TH AVENUE
SUITE 25
MIAMI, FL 33177

FEI Number: 65-0589716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABERCROMBIE, WRAY
16115 SW 117TH AVENUE STE 25
MIAMI, FL 33177

Name and Address of New Registered Agent:

ABERCROMBIE, WRAY
16115 SW 117TH AVENUE
SUITE 25
MIAMI, FL 33177

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: WRAY ABERCROMBIE

03/27/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ABERCROMBIE, WRAY
Address: 16115 SW 117TH AVENUE STE 25
City-St-Zip: MIAMI, FL 33177

Title: VD () Delete
Name: ABERCROMBIE, KAREN
Address: 16115 SW 117TH AVENUE STE 25
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: WRAY ABERCROMBIE

PD

03/27/2002

Electronic Signature of Signing Officer or Director

Date