


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 15, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000019030 1. Entity Name ABACUS SALES COMPANY, INC.	
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Principal Place of Business 455 FAIRWAY DR. SUITE 102 DEERFIELD BEACH, FL 33441	Mailing Address 777 TERRACE AV 2 PL HASBROUCK HEIGHTS, NJ 07604
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DO NOT WRITE IN THIS SPACE



03242004 No Chg-P CR2E034 (10/03)

4. FEI Number 13-3874932	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HRABOVSKY, PAUL 455 FAIRWAY DRIVE, SUITE 102 DEERFIELD BEACH, FL 33441	DO NOT WRITE IN THIS SPACE
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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.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinitializing)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DD CONIGLIO, ROSARIO J 99 HOOK ROAD BAYONNE, NJ 07002
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D SHAPIRO, HARVEY 122 BURR LANE DIX HILLS, NY 11746
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/15/04-80057-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Harvey Shapiro</u> <u>HARVEY SHAPIRO / S</u> <u>4/14</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date	Daytime Phone #
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