FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # ABT SERVICE, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000025692 (0)

FILED Feb 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 100 NORTH BISCAYNE BLVD., 30TH FLOOR 100 NORTH BISCAYNE BLVD., 30TH FLOOR MIAM! FL 33132 MIAMI FL 33132 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 <u>65-0656919</u> Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 29 30 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HEYDASCH, AXEL ESQ. 100 NORTH BISCAYNE BLVD., 30TH FLOOR 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33132 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Ftorida 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 Lionida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familia with, and accept the obligations of, Section 607.0505, Plorida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and little if appli Registered Agent signature required when reinstaling 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 PTD DELETE Change Addition TITLE 1.1 TITLE teyke, barbara NAME PASSAUER STR. 12 STREET ADDRESS 1.3 STREET ADDRESS 10789 BERLIN GERMANY 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 71716 TEYKE, AXEL 2.2 NAME NAME PASSAUER STR. 12 STREET ADDRESS 2.3 STREET ADDRESS 10789 BERLIN GERMANY CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 1 2/11/98 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAMI STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change __ Addition TITLE 6.1 THLE NAME 6.2 NAME 700002428407 -02/12/98--01016--020 STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Horda Statutes. I further certify that the information indicated on this annual report or supplier botal annual report is true and accurate and that my signature shall have the same legal effoct as if made under oath; that I am an officer or director of the corporation or the foccion of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attackment with an address.

DZ-DI-QR