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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000031142 (7)

ABBEY COMMERCIAL, INC.

## **FILED** May 06 1998 8:00am Secretary of State



Orington Disc	o of Business	Mailing Address		
, ,		J		
2643 Gulfstream Dr Miramar Fl 33023		2643 GULFSTREAM DR Miramar Fl 33023		
	. 49960	MADE TE GOOD		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				04/14/1997
2. Principal Place of Business		2a. Mailing Address		4 EEI Number
21		26		Has No 7 Go 7 UP Prom Grand X Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
		City & State		Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution L. Added to Fees
ZID .	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29 30	<u>D]</u>	Personal Property Tax due June 30. Yes X No
Name and Address of Current Registered Agent  IIINANI DACIII  81 Name  81 Name				10. Name and Address of New Registered Agent
JINADU, RAFIU			81 Name	
2643 GULFSTREAM DR			82 Street Add	dress (P.O. Box Number is Not Acceptable)
MIRAMAR FL 33023			83	
			63	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, 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.				
l	- A- A- 1			1100190
SIGNATURE Signature, typod or protocharmo of registered agont and total of appricable (NOTE Registered Agent signature required when reinstating)  DATE				
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	JINADU, RAFIU	<u> </u>	1.2 NAME	
STREET ADDRESS	2643 GULFSTREAM DR		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33023		1.4 CITY-ST-ZIP	
TITLE	D	DELETE	2.1 TITLE	Change Addition
NAME	COKER, CHRISTIANA		2.2 NAME	
STREET ADDRESS	2643 GULFSTREAM DR		2 3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33023		2 4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	ļ
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4 3 STREET ADDRESS	ĺ
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DEL <b>E</b> TE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	İ
STREET ADDRESS			5.3 STREET ADDRESS	ļ
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		DELETE	61 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY - ST - ZIP			6.4 CITY-ST-ZIP	
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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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

IRAFIN JMADA

Post ison

4/20/28