


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 17, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000094290	
1. Entity Name ABBA IMPEX CORPORATION	

Principal Place of Business 9092 127 STREET N SEMINOLE, FL 33776	Mailing Address 9092 127 STREET N SEMINOLE, FL 33776
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**DO NOT WRITE IN THIS SPACE**



05132004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3099451	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  STEPNIEWSKI, JANUSZ 9092 - 127 STR N SEMINOLE, FL 33776	<b>DO NOT WRITE IN THIS SPACE</b>
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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 Janusz Stepan DATE May 12 04

Signature Word or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P STEPNIEWSKI, JANUSZ 9092 - 127 ST N SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP STEPNIEWSKI, HALINA C 9092 - 127 ST N SEMINOLE, FL 33776
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05/17/04-80010-014 150.00

**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Janusz Stepan DATE May 12 04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR