## 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 P97000105971 (0)

A.B.N. CORPORATION

## **FILED** Apr 13 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address		T INTIINUS TIG IRISE SANII ATIII BOTTE BASAL SINNI ANNO TITIR INCII LOTAL INCI
2500 N FEDERAL HWY DELRAY BEACH FL 33483		2500 N FEDERAL HWY DELRAY BEACH FL 33483		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
Dissipal	Name of Divisions	1 8- 14-" to Add.	······································	12/17/1997
·	Place of Business	26. Ma y Address 26 4112 (1).	BLUE HERON I	4. FEI Number  Applied For  Not Applicable
Suite, Apl.	# etc	Suitr pt. #, etc.	COC MCROTT	807 65 - 079942   Not Applicable   \$8.75 Additional
22	., 515.			5. Certificate of Status Desired Fee Required
City & Stat	0	City & State		6. Election Campaign Financing \$5.00 May Be
23		28 RIVIERA		Trust Fund Contribution Added to Fees
Zip	Country	- Zipaakinki	Country	8. This corporation owes or has paid the current year Intangible
24	25	Pagistared Agent	30 U.S.A	Personal Property Tax due June 30. Yes You 10. Name and Address of New Registered Agent
241 Name				
PATEL, BKIKHU 2500 N FEDERAL HWY			82 Street Ad	ddogo (D.O. Doy Niyebay is Not Assaulthia)
DELRAY BEACH FL 33483				ddress (P.O. Box Number is Not Acceptable)
ļ			83	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 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.				
SIGNATURE Signature, lypod or priored name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	PRESIDENT Change Addition
NAME	PATEL, BHIKHU		1.2 NAME	PATEL, BHIFHU
STREET ADDRESS	2500 N FEDERAL HWY		1.3 STREET ADDRESS	ASDO H. FENERAL HOLY
CITY-ST-ZIP	DELRAY BEACH FL 33483		1.4 CITY-SY-ZIP	DELPAY BEACH, FL-33483
TITLE		DELETE	2.1 TITLE	Change Addition
NAME	PATEL, MIKESH	A CONTRACTOR	2.2 NAME	PATEL, HILESH AIK W. BLUE HEROH BLVD
STREET ADDRESS		ICECIA BLUD	2.3 STREET ADDRESS	
CITY-ST-ZIP	ANTIERA BEAGH	FL 33404	2. 4 CITY - ST - ZIP	RIVIERA BEACH, FL 33404
TITLE		☐ DELETE	3.1 TITLE	PATEL, ARVITIO Change Addition
NAME			3.2 NAME	4031 BOCA TRAIL
STREET ADDRESS			1.	FORT WAYNE, IN-46815
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP	Change Addition
NAME			4. 2 NAME	C Olimba C Multiple
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	_ ·
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
			O.O OTTICE : TROUTEDO	

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 attantion to the corporation of the corporation or the receiver 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 attantion to the corporation of the corporation

SIGNATURE:

313498