

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000013657

Entity Name: ABC'S BOOK SUPPLY, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

7301 WEST FLAGLER STREET  
MIAMI, FL 33144

## New Principal Place of Business:

## Current Mailing Address:

7301 WEST FLAGLER STREET  
MIAMI, FL 33144

## New Mailing Address:

FEI Number: 65-0814296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAMAS, REBECA RAQUEL  
7301 WEST FLAGLER STREET  
MIAMI, FL 33144 US

## Name and Address of New Registered Agent:

ROSAS, CARIDAD  
7301 WEST FLAGLER STREET  
MIAMI, FL 33144 US

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.

SIGNATURE: CARIDAD ROSAS

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LAMAS, REBECA RAQUEL  
Address: 25055 SW 202 AVENUE  
City-St-Zip: HOMESTEAD, FL 33130

Title: VPS ( ) Delete  
Name: ROSAS, CARIDAD  
Address: 9143 SW 90 TERRACE  
City-St-Zip: MIAMI, FL 33173

Title: VP ( ) Delete  
Name: ROSAS, SILVIA S  
Address: 7210 SW 100 COURT  
City-St-Zip: MIAMI, FL 33173

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARIDAD ROSAS

VPS

04/20/2009

Electronic Signature of Signing Officer or Director

Date