

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000004881

1. Entity Name
AB&B ENTERPRISE, INC.



FILED

05 MAR 11 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
8001 S OBT
#992B
ORLANDO, FL 32809 US

Mailing Address
8001 S OBT
#992B
ORLANDO, FL 32809 US

2. Principal Place of Business
6641 BOUGANVILLE
Suite, Apt. #, etc. CR. DR.,

3. Mailing Address
6641 BOUGANVILLE
Suite, Apt. #, etc. CR. DR.,

City & State
ORLANDO FL

City & State
ORLANDO FL

Zip
32809

Country
USA

Zip
32809

Country
USA



REINSTATEMENT

4. FEI Number
59-3552488

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CHIN, KANWAL N
6641 BOUGANVILLE CRESCENT DR
ORLANDO, FL 32809

7. Name and Address of New Registered Agent
Name
NARINDER SINGH
Street Address (P.O. Box Number is Not Acceptable)
6641 BOUGANVILLE CR. DR.,
City
ORLANDO FL Zip Code
32807

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 Narinder Singh NARINDER SINGH 3.7.05
Signature, typed or printed name of registered agent and this applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☒ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SINGH, NARINDER		NAME	400048845204	
STREET ADDRESS	6641 BOUGANVILLE CRESCENT DR.		STREET ADDRESS	03/22/05--01019--002 **163.75	
CITY-ST-ZIP	ORLANDO, FL 32809		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	Y. P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	DALBIR SINGH.	
STREET ADDRESS			STREET ADDRESS	6641 BOUGANVILLE CR. DR.,	
CITY-ST-ZIP			CITY-ST-ZIP	ORLANDO, FL 32809	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. 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 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: Narinder Singh NARINDER SINGH 3.7.05
Signature and typed or printed name of signing officer or director Date