


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000020540</b> 1. Entity Name ABC US HOLDINGS, INC.	
---	---

Principal Place of Business 13005 CORONADO DRIVE MIAMI, FL 33181	Mailing Address 13005 CORONADO DRIVE MIAMI, FL 33181
--	--

**DO NOT WRITE IN THIS SPACE**



04232004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0909462	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  ARTOUNIAN, ART 13005 CORONADO DRIVE MIAMI, FL 33181
--

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADIE, SET 9880 S.W. 4TH ST. PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARTOONIAN, ROOBK 1552 N.W. 102 DRIVE CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARTOUNIAN, ART 13005 CORONADO DRIVE MIAMI, FL 33181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANIALY, VACHIK 1870 N. 50 AVE HOLLYWOOD, FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVODI, VREJ 104 S.W. 2ND AVE. HALLANDALE, FL 33009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DROHAN, GAGIK 8274 HUNTSMAN PL. BOCA RATON, FL 33433

U00000129931  
04/26/04-80038-006 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 another like empowered.

SIGNATURE: Art Artounian  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/04 (305) 778-9444  
Date Daytime Phone #