

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024782

Entity Name: A BIMMER BASE, INC.

FILED  
May 02, 2007  
Secretary of State

**Current Principal Place of Business:**

2345 ALI BABA AVE  
OPA LOCKA, FL 33054 US

**New Principal Place of Business:**

**Current Mailing Address:**

2566 NW 86TH AVENUE  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 65-0909747

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAWES, SAMUEL N  
2566 NW 86TH AVENUE  
CORAL SPRINGS, FL 33065 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HAWES, SAMUEL N  
Address: 2566 NW 86TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D ( ) Delete  
Name: NIXON, SUZANNE S  
Address: 2566 NW 86TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: SUZANNE S. NIXON

MGR

05/02/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date