

2001 UNIFORM BUSINESS REPORT (UBR)

3/

FILED

Mar 29, 2001 8:00 am
Secretary of State

03-06-2001 90006 038 ***158.75

DOCUMENT # P99000034545

1. Entity Name
ABFI, INC.

Principal Place of Business
9111 S.W. 151ST AVENUE ROAD
MIAMI FL 33196

Mailing Address
9111 S.W. 151ST AVENUE ROAD
MIAMI FL 33196

2. Principal Place of Business
13454 SW 144 TERRACE

3. Mailing Address
13454 SW 144 TERR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI FLORIDA

City & State
MIAMI, FLORIDA

Zip
33186

Country
USA

Zip
33186

Country
USA

4. FEI Number
65-1005292

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUSSETT, ANTHONY
9111 S.W. 151ST AVENUE ROAD
MIAMI FL 33196

Name

Street Address (P.O. Box Number is Not Acceptable)

13460 SW 144 TERRACE

City MIAMI

FL

Zip Code
33186

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD BLISSETT, ANTHONY 9111 S.W. 151ST AVENUE ROAD MIAMI FL 33196	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	13460 SW 144 TERRACE MIAMI FL 33186	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/01 305 971-4473

Date

Daytime Phone #

CR2E034 (10/00)