

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S62540

FILED
Apr 20, 2005
Secretary of State

Entity Name: ABEL UNLIMITED INC.

Current Principal Place of Business:

1649 FORUM PLACE
STE 12
W PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

1649 FORUM PL
STE 12
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 04-2486868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MALTZ, MARVIN
1649 FORUM PLACE
STE 12
WEST PALM BEACH, FL 33401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MALTZ, ROBERT B.,
Address: 6769 MOLAKAI CIR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: MALTZ, JUDITH M.,
Address: 6769 MOLAKAI CIR
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: MALTZ, MARVIN,
Address: 106 SEGOVIA WAY
City-St-Zip: JUPITER, FL 33458

Title: D (X) Delete
Name: METSKY, INA
Address: 10146 ASPEN WAY
City-St-Zip: WEST PALM BEACH, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MALTZ, ALISA,
Address: 106 SEGOVIA WAY
City-St-Zip: JUPITER, FL 33458

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 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 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: MARVIN MALTZ

D

04/20/2005

Electronic Signature of Signing Officer or Director

_____ Date