## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

ABS INVESTMENTS & ENTERPRISES, INC.

**FILED** 

May 13 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address  8943 TAFT ST PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024			00004			- L 180011911 183 1019 	)    U    <b>     U    </b>	))(  <b>           </b>	<b>                                     </b>	1961 <b>(1961)</b>	
PEMBROKE I	PINES FL 33024	PEMBROKE PINES FL	PEMBROKE PINES FL 33024			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporate 10/21/1991	d or Qualified	<del></del>			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			TA	polied For	
21		26				65-029128	17		-	lot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	<del> </del>			5. Certificate of Sta			<b>+</b>	Additional	
City & State		City P. State	City & State							lequired	
23	•	28	<b>├</b> ¬ ′			<ol><li>Election Campaign Trust Fund Contr</li></ol>	-			May Be to Fees	
Zip	Country Zip Co			try	C. This corporation owes of his paid the carrent year intanglate						
24	25 29 30 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No  10, Name and Address of New Registered Agent						
		nt Hegistered Agent		31	Name	10, Name and Addr	ess of New He	Deserved	Agent		
BURKE, RONALD 8943 TAFT ST											
	MBROKE PINES FL 33024		82 Street Add			ss (P.O. Box Number i	is Not Acceptal	ble)			
			1	33							
			1	94	City			FL	<b>85</b> Zip	Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the abo	L ove-r	named corpo	ration submits this sta	tement for the		<u>l</u> changing	its registered	
office or re agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was gations of, Section 607.0505, F	authorized lorida Statu	by ti tes.	he corporatio	on's board of directors.	. I hereby acce	pt the app	ointment as	s registered	
SIGNATURE											
Signature, typod or printed name of registings agent and title if applicable (NOTE: Registered					signature required		1050 70 055	DATE	0.0000000	50.01.40	
12.	D OFFICERS AF	ND DIRECTORS  DELETE	13.			ADDITIONS/CHAN	IGES TO OFFIC	JEHS ANL	Change	Addition	
NAME	BUDYE BOMALD		1.2 NAN		ي سر	OPARU.	C01-	LZEN	5	LEI AUURUN	
STREET ADDRESS	11601 NW 14TH CT.				DDRESS 1 a	402	1 103	21	ſ		
CITY-ST-ZIP	PEMBROKE PINES FL 3302	6	1.4 CIT				27	2,67	7		
TITLE	7	DELETE	2.1 TITL						Change	☐ Addition	
NAME	CREARY, CARL		2.2 NAME								
STREET ADDRESS	16500 SW 105TH CT.		2.3 STREET ADDR		DDRESS						
CITY-ST-ZIP	MIAMI FL 33157		2. 4 CIT	Y-ST-	- ZIP						
TITLE		☐ DELETE	E 3.1 TITLE						☐ Change	☐ Addition	
NAME			3.2 NAA	4E							
STREET ADORESS					DDRESS						
CITY-ST-ZIP				Y-ST-	-ZIP			<del></del>	Change	Addition	
TITLE		ריין מנרבוב	4.1 TITL						Change	Addition	
NAME			4. 2 NA		nonree						
STREET ADDRESS ( City-St-Zip			4.3 S IK		DDRESS						
TITLE		DELETE	5.1 3ITL		ZIF				Change	Addition	
NAME			5.2 NAN								
STREET ADDRESS			5 3 STR		ODRESS						
CITY-ST-ZIP			5.4 CITY								
TITLE		DELETE	6.1 TITL						Change	Addition	
NAME			6.2 NAM	4E							
STREET ADDRESS			6.3 STR	EET AD	DDRESS						
CITY-ST-ZIP			6.4 CITY								
14. I hereby of indicated	ertify that the information supplied on this annual report or supplement	with this filing does not qualify tall annual report is true and ac	for the exer	nptio that	in stated in Si my signature	ection 119.07(3)(i), Flo shall have the same t	orida Statutes. I legal effect as i	i further ce	rtify that the	e information	

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 12 or Block 13 il changed, or on an attachment with an address.