

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000089919

Entity Name: THE ABEKA STORE, INC.**Current Principal Place of Business:**240 WAVELAND STEET
SUITE B
PENSACOLA, FL 32503**Current Mailing Address:**P.O. BOX 19100
PENSACOLA, FL 32523 US**FEI Number: 27-1401639****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHOEMAKER, TROY DR.
250 BRENT LANE
PENSACOLA, FL 32523 US*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**Officer/Director Detail :**

Title	PRESIDENT, DIRECTOR
Name	SHOEMAKER, TROY DR.
Address	250 BRENT LANE
City-State-Zip:	PENSACOLA FL 32523

Title	DIRECTOR
Name	WELTON, DONALD MR
Address	8537 JORDAN RD
City-State-Zip:	BAKER FL 32531

Title	SECRETARY
Name	SHOEMAKER, DENISE MRS
Address	250 BRENT LANE
City-State-Zip:	PENSACOLA FL 32503

Title	TREASURER
Name	EAST, BEN MR
Address	3401 MARCUS POINT BLVD
City-State-Zip:	PENSACOLA FL 32505

Title	DIRECTOR
Name	EAST, GARY MR.
Address	5124 PINE HOLLOW DR
City-State-Zip:	PENSACOLA FL 32505

I hereby 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 all other like empowered.

SIGNATURE: BEN EAST**TREASURER****03/27/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date