2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002524

Entity Name: ABBE LABORATORIES, INC.

DELRAY BEACH, FL 33446

City-St-Zip:

FILED Feb 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1095 ROUTE 110 UNIT E-F FARMINGDALE, NY 11735 **Current Mailing Address: New Mailing Address:** 1095 ROUTE 110 UNIT E-F FARMINGDALE, NY 11735 FEI Number: 11-3039717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POSNER, ELEANOR POSNER, ELEANOR 3000 N. ÓCEAN AVE 13505 SHELL BEACH COURT SINGER ISLAND, FL 33404 US DELRAY BEACH, FL 33446 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: 02/12/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition POSNER, ELEANOR Name: Name: 13505 SHELL BCH CT Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: () Delete Title: Title: () Change () Addition Name: POSNER, ROBERT Name: 13505 SHELL BCH CT Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ELEANOR POSNER **PRES** 02/12/2007