

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000141264

Entity Name: ABLTECH SERVICES, INC.

FILED
Feb 26, 2009
Secretary of State

Current Principal Place of Business:

4152 CENTRAL SARASOTA PKWY
721
SARASOTA, FL 34238 SA

Current Mailing Address:

4152 CENTRAL SARASOTA PKWY
721
SARASOTA, FL 34238 SA

FEI Number: 20-3652411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

New Principal Place of Business:

4160 CENTRAL SARASOTA PKWY
621
SARASOTA, FL 34238 SA

New Mailing Address:

4160 CENTRAL SARASOTA PKWY
621
SARASOTA, FL 34238 SA

Name and Address of Current Registered Agent:

LEONI, MICHAEL S
5561 CARSO TERRACE
NORTH PORT, FL 34286 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: P () Delete
Name: LEONI, MICHAEL S
Address: 5561 CARSO TERRACE
City-St-Zip: NORTH PORT, FL 34286 SA

Title: VP () Delete
Name: BERG, RYAN C
Address: 4152 CENTRAL SARASOTA PKWY
City-St-Zip: SARASOTA, FL 34238 SA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: BERG, RYAN C
Address: 4160 CENTRAL SARASOTA PKWY 621
City-St-Zip: SARASOTA, FL 34238 SA

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL S LEONI

P

02/26/2009

Electronic Signature of Signing Officer or Director

_____ Date