


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000159533

1. Entity Name
A & D DRILLING SUPPLY CORPORATION



Principal Place of Business 6401 SW 87TH AVENUE SUITE 207 MIAMI, FL 33173	Mailing Address 6401 SW 87TH AVENUE SUITE 207 MIAMI, FL 33173
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DO NOT WRITE IN THIS SPACE



01032006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1944627	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BRADY, ELISABETH V
 6401 SW 87TH AVE
 207
 MIAMI, FL 33173**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

01/06/06 08:00 AM
 01/06/06 P04000159533 \$150.00

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GELDEAN, ALLAN J 5220 SW 113 AVE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GELDEAN, ROBERT E 5220 SW 113 AVE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BRADY, ELISABETH V 6225 SW 87TH AVE MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elisabeth Brady* Date: 1/3/06 Daytime Phone #: 305-271-6797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR