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FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000065758 (9)

1. Corporation Name

ADULLAM CORPORATION

Principal Place of Business

14120 PALM ST
SUITE 204
MADEIRA BEACH FL 33708

Mailing Address

14120 PALM ST
SUITE 204
MADEIRA BEACH FL 33708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1997

4. FEI Number

59-3459740

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

KUIPER, BRIAN
14221 JOEL CT
LARGO FL 34644

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Brian K. Kuiper
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2-20-98
DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DP
CABRAL, LIONEL
STREET ADDRESS 14120 PALM ST SUITE 204
CITY-ST-ZIP MADEIRA BEACH FL 33708

TITLE ☐ DELETE

NAME DV
KUIPER, BRIAN K
STREET ADDRESS 14221 JOEL CT
CITY-ST-ZIP LARGO FL 34644

TITLE ☐ DELETE

NAME DT
CABRAL, NICOLE
STREET ADDRESS 14120 PALM ST SUITE 204
CITY-ST-ZIP MADEIRA BEACH FL 33708

TITLE ☐ DELETE

NAME DS
KUIPER, CAROL L
STREET ADDRESS 14221 JOEL CT
CITY-ST-ZIP LARGO FL 34644

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Lionel Cabral

PRESIDENT
LIONEL CABRAL

2-20-98

CR2E034 (10/97)