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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 559736 1. Corporation Name

ADVERTISING AND DESIGN SYSTEMS, INC.						 		Right Right (88)
Principal Place	of Business	Mailing Address				i idilit bilat gitin iniit innen iiita biti nin	îi didir diktî didir r	#{##! BIBI! 1801
800 BRICKELL AVENUE SUITE 1100 MIAMI FL 33131 US 800 BRICKELL AVENUE SUITE 1100 MIAMI FL 33131 US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/14/1978		
3 Principal Di	lace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For
	. ·	26		•		59-1815178		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	*****	Additional equired
22 27 City & State City & State						6. Election Campaign Financing		May Be
		├				Trust Fund Contribution		to Fees
Zip	Country	Zip	Cou	intry		This corporation owes the current year Personal Property Tax.		⊠ No
24	25 29 9. Name and Address of Current Registered Agent		30	30		10. Name and Address of New Register		
	9. Name and Address of Current	vedistelan vident		81	Name	10. Hame and passess of from hegisters		
CORPORATE ACCESS, INC.				1		ress (P.O. Box Number is Not Acceptable)	-	
1116-D THOMASVILLE ROAD				83			·	
MOUNT VERNON SQUARE TALLAHASSEE FL 32303				83				
					City	_	' L	Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was	authorized	a by tr	-named corp he corporati	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	or changing its pointment as re	gistered
SIGNATURE		- 4 Mary 16 amplicable (NOT	FE: Dogistario	d Acont	eignatura roquira	ed when reinstating) DATE		
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	a Agoin	agnatare require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE			1.1 Ti	TLE			☐ Change	Addition
NAME	JACKSON, ESTHER		1.2 N	1.2 NAME			į]
STREET ADDRESS	The second court and account areas		1.3 \$	1.3 STREET ADDRESS				1
CITY-ST-ZIP	MIAMI FL 33131	•	1.4 C	ITY-ST-	-ZIP			
TITLE			2.1 TI	MLE	İ		☐ Change	☐ Addition
NAME	,		2.2 N	AME				1
STREET ADDRESS	800 BRICKELL AVE, SUITE 1100) `	2.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33131	. 1	2.40	CITY-ST	-ZIP	<u> </u>		
TITLE			3.1 🏗	ITLE			Change	Addition
NAME			3.2 N	AME				-
STREET ADDRESS			3.3 S	TREET	ADORESS			
CITY-ST-ZIP '	• .		_	CITY-ST	-ZIP	t and the second		
TITLE			4.1 Π				Change	☐ Addition
NAME	<i>"</i>			NAME		•		
STREET ADORESS			1		ADDRESS			
CITY-ST-ZIP		□ DELETE	_	TY-ST-	-ZIP		Change	☐ Addition
TITLE		☐ DELETE	5.1 T	itle Iame			C Change	
NAME			4		ADDRESS			
STREET ADDRESS			1	TREET /	ADDRESS			
CITY-ST-ZIP		☐ DELETE	6.1 To		· LIP	- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-	Change	Addition
TITLE		□ vereie		IAME			_ onungo	
NAMÉ	•				ADDRESS			,
STREET ADDRESS	l .		0.00					ļ

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 trusten ampowered 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP