

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047488

Entity Name: ADSS.TV, INC.

FILED
Mar 24, 2005
Secretary of State

Current Principal Place of Business:

4380 PGA BOULEVARD
SUITE 101
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4380 PGA BOULEVARD
SUITE 101
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

4400 P.G.A. BLVD.
SUITE 902
PALM BEACH GARDENS, FL 33410

New Mailing Address:

4400 P.G.A. BLVD.
SUITE 902
PALM BEACH GARDENS, FL 33410

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPILLERS, RANDALL
4380 PGA BOULEVARD
SUITE 101
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

SPILLERS, SUZANNE
4400 P.G.A. BLVD.
SUITE 902
PALM BEACH GARDENS, FL 33410 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: SUZANNE SPILLERS

03/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SPILLERS, RANDALL
Address: 6746 195 PLACE NORTH
City-St-Zip: JUPITER, FL 33458

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SPILLERS, SUZANNE
Address: 4400 P.G. A. BLVD. SUITE 902
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Change (X) Addition
Name: SPILLERS, RANDALL
Address: 4400 P.G.A. BLVD. SUITE 902
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUZANNE SPILLERS

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03/24/2005

Electronic Signature of Signing Officer or Director

Date