CORPC ANNUAL	OFIT DRATION L. REPORT	22		B. Mortham ary of State					
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, Corporation Na ADCO F	PATCH, INC.					4 100 100 100 100 100 100 100 100 100 10	n 11 100 (111) 8 (1	nii Alaid Niaih Billii	ALANI BIRU HAR
hincipal Place of		Ma	aling Address 3091 NW 129TH STF	oeet					
3091 NW 129T OPA LOCKA F			OPA LOCKA FL 330						
						3. Date Incorporated or Qualific 05/19/1971	od 3a . 0	Date of Last Re 01/31/19	
. Principal Place	of Business	F	Mailing Address			4. FEI Number 59-1424260		L	ot Applicable
∐ Suite, Apt. ∜. €	etc	26	Suite, Apt. #, etc.			5. Certificate of Status Desired	[D/	\$8.75	Additional
<u>.</u>		27	Cat. P State		<u> </u>	Election Campaign Financing			equired May Be
Gity & State		28	City & State			Trust Fund Contribution		Added	to Fees
Ζιρ	Country	29	Ζφ	Country 30	•	8. This corporation has liability Florida Statutes	for intangib Yes □ No	le tax under s	199.032,
1	25 9. Name and Address of		tered Agent			10. Name and Address of Ne	w Register	red Agent	
				81	Name			•	
DADNICO	EDDE I					(D.O. Boy Number is Not Acces	ntable)		
BARNES 3091 NW	, EDDIE J V 129 ST			82		Iress (P.O. Box Number is Not Acce	otable)		
3091 NW PO BOX	V 129 ST . 262			82 83		lress (P.O. Box Number is Not Acce	otable)		
3091 NM PO BOX OPA LOC	V 129 ST 262 CKA FL 33054 the provisions of Sections 6			83 84 Ites, the above-lized by the corp	City	L. V. Alla etabassa for the	Durnoss o	f changing its re	Code ogistered office agent. I am
3091 NM PO BOX OPA LOI 11. Pursuant to or registered familiar with,	V 129 ST 262 CKA FL 33054 the provisions of Sections 6 i agent, or both, in the State, and accept the obligations	of Section 607	.0505, Florida Statute	83 84 stes, the above- ized by the corp is.	City named corpo poration's boa	pration submits this statement for the and of directors. I hereby accept the	purpose o appointmer	f changing its rot as registered	egistered office agent. I am
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SIGNITURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

2/18/96 (305)681-2196