

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 382423

(2)

1. Corporation Name

ADCO PATCH, INC.



Principal Place of Business

3091 NW 129TH STREET
OPA LOCKA FL 33054

Mailing Address

3091 NW 129TH STREET
OPA LOCKA FL 33054

3. Date Incorporated or Qualified
05/19/1971

3a. Date of Last Report
01/31/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

4. FEI Number
59-1424260

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BARNES, EDDIE J
3091 NW 129 ST
PO BOX 262
OPA LOCKA FL 33054

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

Signature, typed or printed name of registered agent and then applicant

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
2. TITLE
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STREET ADDRESS
CITY - ST - ZIP

SIGNATURE: *Joanne M. Barnes*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE ☐ Change ☐ Addition

2. 2. NAME ☐ Change ☐ Addition

3. 3. STREET ADDRESS ☐ Change ☐ Addition

4. 4. CITY - ST - ZIP ☐ Change ☐ Addition

5. 5. TITLE ☐ Change ☐ Addition

6. 6. NAME ☐ Change ☐ Addition

7. 7. STREET ADDRESS ☐ Change ☐ Addition

8. 8. CITY - ST - ZIP ☐ Change ☐ Addition

9. 9. TITLE ☐ Change ☐ Addition

10. 10. NAME ☐ Change ☐ Addition

11. 11. STREET ADDRESS ☐ Change ☐ Addition

12. 12. CITY - ST - ZIP ☐ Change ☐ Addition

13. 13. TITLE ☐ Change ☐ Addition

14. 14. NAME ☐ Change ☐ Addition

15. 15. STREET ADDRESS ☐ Change ☐ Addition

16. 16. CITY - ST - ZIP ☐ Change ☐ Addition

17. 17. TITLE ☐ Change ☐ Addition

18. 18. NAME ☐ Change ☐ Addition

19. 19. STREET ADDRESS ☐ Change ☐ Addition

20. 20. CITY - ST - ZIP ☐ Change ☐ Addition

21. 21. TITLE ☐ Change ☐ Addition

22. 22. NAME ☐ Change ☐ Addition

23. 23. STREET ADDRESS ☐ Change ☐ Addition

24. 24. CITY - ST - ZIP ☐ Change ☐ Addition

25. 25. TITLE ☐ Change ☐ Addition

26. 26. NAME ☐ Change ☐ Addition

27. 27. STREET ADDRESS ☐ Change ☐ Addition

28. 28. CITY - ST - ZIP ☐ Change ☐ Addition

CR2E034 (12/95)

2/13/96 (305) 681-2196
Date Daytime Phone