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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Apr 21, 1999 8:00 am Secretary of State 04-21-1999 90121 028 ***150.00

1999

DOCUMENT # 612582

ADAM HILL ADVERTISING CORPORATION

Principal Place of Business 2699 STIRLING RD #B301 FT. LAUDERDALE FL 33312

Mailing Address

2699 STIRLING RD #B301 FT. LAUDERDALE FL 33312



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

03/12/1979

2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
4		26	والمحمد		59-1895643		Not Applicable
~	uite, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	1 1	Additional Required
City & State	Δ	City & State	_		6. Election Campaign Financing	\$5.00	0 May Be
		h			Trust Fund Contribution		d to Fees
Zin.	Zip Country Zip		Country		8. This corporation owes the curre	ent vear Intangible	
–	25 29 30				Personal Property Tax.	☐Yes	⊠No
9. Name and Address of Current Registered Agent			'	10. Name and Address of New Registered Agent			
	J. Halle Bild Addition		81	Name			
AIOSSA, NICK, JR.							
9001 S.W. 55TH COURT				Street Addre	ess (P.O. Box Number is Not Acceptal	ole)	
COOPER CITY FL 33328							
			84	City		FL " '	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	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Ager	nt signature required		DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFF		
TITLE	PD	☐ DELETE	1.1 TITLE			Change	e
NAME	AIOSSA, NICK, JR.		1.2 NAME				
STREET ADDRESS	9001 S.W. 55TH CT.		1.3 STREE	ADDRESS			
CITY-ST-ZIP	COOPER CITY FL		1.4 CITY+S	T-ZIP			
TITLE	VP DELETE		2.1 TITLE			☐ Change	e 🗌 Addition
NAME	**		2.2 NAME				i
STREET ADDRESS	-18315 FLINT-HILL		.2.3-STREE	TADDRESS			
CITY-ST-ZIP	KATY TX		2. 4 CITY-5	ST-ZIP			
TITLE			3.1 TITLE			☐ Change	e 🔲 Addition
NAME			3.2 NAME	İ			- {
STREET ADDRESS			8	TADORESS			ľ
	•		3.4. CITY-S		•		
CITY-ST-ZIP TITLE			4.1 TITLE			☐ Change	e Addition
NAME			4, 2 NAME				ļ
				T ADDRESS			1
STREET ADDRESS			4.3 STREE				
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	1.71		Change	e 🔲 Addition
TITLE			5.2 NAME			_ ·	_
NAME		•		T ADDRESS			1
STREET ADDRESS			5.4 CITY-S				1
CITY-ST-ZIP		□ DELETE	6.1 TITLE	1-411-		☐ Change	e Addition
TITLE		□ pere le	6.2 NAME				
NAME			J	TADODEOG			ļ
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	L		6.4 CITY-S		440 07(2)(i) 51-14-01-1	further contifut their the	o information
14. I hereby	certify that the information supplied with	this filing does not qualify for th	ne exempt	ion stated in S	ection 119.07(3)(i), Florida Statutes. J	iurmer certify that the	5 HOURINGH

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 ar 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, with all other like empowered.

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