FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 9:16

DOCUMENT # **F28857** **(3)**

1. Corporation Name
AD-MAR SERVICES, INC.

Principal Place of Business	Mailing Address
531 BAY DRIVE VERO BEACH FL 32963	531 BAY DRIVE VERO BEACH FL 32963

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
04/08/1981	05/27/1994

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

4. FEI Number: 59-2086942 ☐ 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. 109.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ENSIO, MARK 4691 S.W. BRANCH TERR. W. PALM CITY FL 33490	01 Name: ENSIO MARK 02 Street Address (P.O. Box Number is Not Acceptable) 03: 531 BAY DRIVE 04 City: VERO BEACH FL 05 Zip Code: 32963

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 of new registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	PTD ☐ Change ☐ Addition
NAME	ENSIO, MARK	12 NAME	ENSIO MARK
STREET ADDRESS	4691 SW BRANCH TER. W.	13 STREET ADDRESS	531 BAY DRIVE
CITY-ST-ZIP	PALM CITY FL	14 CITY-ST-ZIP	VERO BEACH FLORIDA 32963
TITLE	VSD	21 TITLE	VSD ☐ Change ☐ Addition
NAME	ENSIO, CATHERINE C	22 NAME	ENSIO CATHARINE C
STREET ADDRESS	4691 SW BRANCH TER. W.	23 STREET ADDRESS	531 BAY DRIVE
CITY-ST-ZIP	PALM CITY FL	24 CITY-ST-ZIP	VERO BEACH FLORIDA 32963
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	BUNKER, DONALD (ASST)	32 NAME	
STREET ADDRESS	1981 MCGILL COLLEGE AVE	33 STREET ADDRESS	
CITY-ST-ZIP	MONTREAL, QUEBEC	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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 addition.

SIGNATURE: MARK ENSIO 2/13/95 407-234-8662
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0072200 CP