

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F28857** (3)

1. Corporation Name
AD-MAR SERVICES, INC.



Principal Place of Business

**531 BAY DRIVE
VERO BEACH FL 32963**

Mailing Address

**531 BAY DRIVE
VERO BEACH FL 32963**

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**ENSIO, MARK
531 BAY DRIVE
VERO BEACH FL 32963**

3. Date Incorporated or Qualified

04/08/1981

3a. Date of Last Report

02/21/1995

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. 199.032,
Florida Statutes. ☐ Yes ☐ No

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 604 and 605, 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 obligation of Section 604, Florida Statutes.

SIGNATURE

Signature of New Agent, if applicable, and Accepting

DATE

12. OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY, STATE, ZIP	DATE	DELETE
PTD ENSIO, MARK	531 BAY DRIVE	VERO BEACH FL		☐
VSD ENSIO, CATHERINE C	531 BAY DRIVE	VERO BEACH FL		☐
SD BUNKER, DONALD (ASST)	1981 MCGILL COLLEGE AVE	MONTREAL, QUEBEC		☐
				☐
				☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	STREET ADDRESS	CITY, STATE, ZIP	DATE	DELETE	Change	Addition
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

14. I, the undersigned, certify that the information supplied on this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation and I hereby agree to execute this report as required by Chapter 604, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report. I am a resident of the State of Florida.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] 407-224-8662
Date: 12/17/96

CR2E034 (12/95)