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

PROFIT CORPORATION ANNUAL REPORT

1997

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F95000004788 (4)

ADO INVESTMENTS LIMITED INC.

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Principa: Place of Business Mailing Address								A CONTROL BUT AND A DELLE CONTROL OF	ii Agiii Gal	6:511 (626: 1815)	10111291
71 BELVEDERE Montreal Ol OC	edere circle Eal. Quebec. Ca										
		oc						3. Date Incorporated or Qualified 10/02/1995		Date of Last R 1/01/1996	eport
2. Principal F	Place of Business	<b>2a.</b> Mai	2a. Mailing Address				*	4. FEI Number Applied For			oplied For
21		26									ot Applicable
Suite, Apt 22	#, etc	27 Sun	te, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & Stat	te	City	/ & State					6. Election Campaign Financing		\$5.00	May Be
23		28						Trust Fund Contribution			to Fees
Zipi TTT	Country	Zip			ıntry			This corporation has liability for Florida Statutes	intangit	ole tax under s	. 199.032,
24	25 9. Name and Address of Curr	29 29 Pent Registerer	d Acent	30	T		· · · · · · · · · · · · · · · · · · ·	Florida Statutes  10. Name and Address of New F			
BRU	NTON REGISTERED AGENTS				81	Nan	16		-		
	NW BOCA RATON BLVD., #1					6	- 6 B - 1 - 1 - 1	A CO C Day No. 1 Also Accord			
	A RATON FL 33431				82	Stre	et Addre	ss (P.O. Box Number is Not Accept	ibie)		
					83						
					84	City	······································	ja sa sydanys s	F	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1	508. Florida Stati	utes, the a	bove	-nam	ed corpo				ts registered
office or i	registered agent, or both, in the Sta	ate of Florida, S	Such change was	authorize	d by	the c	orporatio	ration submits this statement for the in's board of directors. I hereby acc	opt the a	ppointment as	registered
	ann it mile. Then, and accopt the co	iligations or, so	1,0000.100	10.100 000	10103	•					
SIGNATURE	Signature, typind or printed name of registered	agent and the if app	l.cable (NC	OTE: Registere	d Age	engla tn	lure required	i when reinstaling)	DATE		
12.		AND DIRECTOR		13.				ADDITIONS/CHANGES TO OFF	ICERS A		
TITEE	DP	•	DELETE	1.1 7	ITLE					Change	Addition
NAME	ULLMAN, ADOLF	$\checkmark$		1.2 N							
STREET ADDRESS	71 BELVEDERE CIRCLE MONTREAL, QUEBEC H3Y 1	00				ADDRES	S				
Crty - St - ZiP	DS	(18)	DELETE		TY-S	T - ZIP				Change	Addition
TITLE	ULLMAN, STELLA		m nerese	211			1			C Cirange	F-1 Modition
NAME STREET ADDRESS	71 BELVEDERE CIRCLE	V		2.2 N		ADDRES					
CITY - ST - ZIP	MONTREAL, QUEBEC H3Y 1	G9				ADUNE:	»				
TITLE			DELETE	3.17		SI-ZIF	<del>-  </del>			☐ Change	Addition
NAME				3.2 N			1	•			
STREET ADDRESS				3.3 \$	TREET	ADDRES	s				
CITY - ST - ZIP				3.4. 0	CITY-S	ST-ZIP					
THLE			DELETE	4.1 T	ITLE					Change	Addition
NAME				4.21	NAME						
STREET ADDRESS				4.3 S	TREET	ADDRES	is				
CITY-ST ZiP				440	ITY-S	T-ZIP					
TITLE			L_ DELETE	5.1 Ti	ITLE		- {			☐ Change	☐ Addition
NAME					AME						
STREET ADDRESS						ADDRES	8				
CITY-ST-ZIF			DELETE	5.4 C	ITY - S	1 - ZIP	<del> </del>			Change	Addition
TITLE NAME			LJ DULLIL	6.2 N			1			Limit Orlange	Final Fredrich
NAME STREET ADDRESS						ADDRES					
C-TY - ST - ZIP					ITY-S		~				
14 Lein hore	Eby certify that the information supr	olied with this fil	ing does not our	alify for the		motio	n stated	in Section 119.07(3)(i), Florida Statu	tes. I fur	ther certify that	the
informati Lam an d appears	ion indicated on this annual report of officer or director of the corporation in Block 12 or Block 13 if stanged	or supplementa n or the receive I, or on an attac	il annual report is r or trustee empo chalen with an a	s true and owered to ddress.	accu exec <b>7</b>	urate a	ind that r is report	my signature shall have the same le as required by Chapter 607, Florida	jal effect Statutes	t as if made un s; and that my	ider oath; that name