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

PROFIT



FLORIDA DEPARTMENT OF STATE

CORPORATION ANNUAL REPORT 1996		Sandra B. Mortham Secretary of State Division of Corporations				
DOCUM 1. Corporation N		H7139	7 (4)			
,	AD'S RESTA	JRANT, INC.				
Principal Place of	Business		Mailing Address		}	ANII 1801 ETRIT BIOIT RIBES BIRIS AIRIS ALDIE INDI
78 DUNLAW PORT ORAN	FON AVE. GE FL 32127		1877 SECLUSION DI DAYTONA FL 32124			
U\$					3. Date Incorporated or Qualified 08/15/1985	3a. Date of Last Report 04/28/1995
2. Principal Place	e of Business		2a. Mailing Address 26		4. FEI Number 59-2580676	Applied For Not Applicable
Suite, Apt. #.	etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State	, <u>,</u>	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	├	untry	28	Country	8. This corporation has liability for	
24	25	Idress of Current F	29	30	10. Name and Address of New I	
SIGNATURE				les, the above named corpored by the corporation's boas s.	au what réadhthui	FL 85 Zip Code urpose of changing its registered office pointment as registered agent. I am
	egnetiate, typical or printed	nace of registered agent as OFFICERS AND I		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
12.	VS	OFFICERS AND	DELETE	1) TIBLE		Change Addition
NAME STREET ADDRESS				. 1.2 NAME 1.3 STREFT ADDRESS 1.4 City ST-7 P		
TITLE NAME STREET ADDRESS	PT VAN HOLL	EBEKE, HILLAIRE, JLSION DRIVE	☐ DELETE JR.	2 1 THLE 2 2 NAME 2 3 STREET ADDRESS		Change Addition
CITY - S1 - ZIP	DAYTONA	BEACH FL	☐ DELFIE	2.4 CITY - ST - ZIP 3.1 HILE		Change Addition
NAME STREET ADDRESS				3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - 7/P		
CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ DELETE	4 1 TITLE 4 2 NAME 4 3 STREL1 ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME			☐ DELETE	4 4 011Y - ST- ZIP 5 1 THUE 5 2 NAME 5 3 STREET ADDRESS		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ACORESS			☐ DÉLE1Ł	5.4 CNY-ST-7/P 6.1 TILE 6.2 NAME 6.3 SHEET ADDRESS		Change Add-tion

14. I do hereby certify that the information supplied with this filing is voluntarly 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 annual report or supplied ental annual report is true and accurate and bad my signature shall have the same legal effect as if made under early; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changed, or on an attachment with an acknowledge.

6.4 CHY+ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR