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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name H96351

ADAIR BUSINESS SERVICES, INC.

(2)

## **FILED** May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
1349 BEVILLE ROAD 1349 BEVILLE ROAD			•		
DAYTONA BEACH FL 32119 US		DAYTONA BEACH FL 32119 US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				01/27/1986	
	Place of Bysiness	2a. Mailing Address	:0 01	4. FEI Number	Applied For
21 1339 Bevelle Rd			ill Rd	59-2619668	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27			Fee Required
23		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation owes or has paid the	Added to Fees
24	25	F	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Currer		21	10. Name and Address of New Registers	
MARKS, JANET 161 GULL CR. N. DAYTONA BEACH FL 32119			81 Name		
			<b>62</b> Street Add	ress (P.O. Box Number is Not Acceptable)	
			Olicel Floo	reas (1.0. Box Humber is Not Acceptable)	
			83		
			84 City		85 Zip Code
	_			F	L
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, typod or pointed name of registered age	int and trie if applicable (NOTE D DIRECTORS	Registered Agent signature requ	· · · · · · · · · · · · · · · · · · ·	
12.	PT	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	ADAIR, MELODY H.		1.2 NAME		
STREET ADDRESS	360 BROWN PELICAN DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BCH. FL		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		·
TITLE		DELETE	3.1 TITLE		Change Addition
RAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		ļ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T DECEM	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		·
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CHY- S1 - 2IP	<del> </del>	Change Addition
TITLE		L.J VELETE	6.1 TITLE		Change Addition
NAME CTOCCT ADDRESS			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP	and the state of t	(1) the contract of the contra	64 CHY-ST-7IP	Postion 110 07/9/ii) Elevide Ptotutes I further	martification takes independed = =

I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 by attachment with an address.