

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 JAN 26 PM 4: 26

DOCUMENT # J95293 (3)

1. Corporation Name

ADS ASSOCIATES, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/02/1987 3a. Date of Last Report 01/25/1994

4. FEI Number 65-0006333 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

2. Principal Place of Business

2a. Mailing Address

2631 E OAKLAND PK BLVD #208
FT. LAUDERDALE FL 33308

2631 E OAKLAND PK BLVD #208
FT. LAUDERDALE FL 33308

21. 1400 E. Commercial Blvd.

26. 1400 E. Commercial Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. Suite #630

27. Suite #630

City & State

City & State

23. Ft. Lauderdale FL

28. Ft. Lauderdale FL

Zip

Country

Zip

Country

24. 33308

25. USA

29. 33308

30. USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SADRIWALLA, DEBORAH
4351 N.E. 22 AVE
FT. LAUDERDALE FL 33308

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 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

Deborah Sadriwalla

(NOTE: Registered Agent signature required when reappointing)

1/19/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME SADRIWALLA, DEBORAH
STREET ADDRESS 4351 NE 22 AVE
CITY-ST-ZIP FT. LAUDERDALE FL

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

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STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

Deborah Sadriwalla

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/95

DATE

305-776-2002

Telephone Number