

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J95293

1. Entity Name
ADS ASSOCIATES, INC.

R

FILED
Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90022 045 ***150.00

Principal Place of Business

2400 E. COMMERCIAL BLVD.
SUITE 630
FT. LAUDERDALE FL 33308
US

Mailing Address

2400 E. COMMERCIAL BLVD.
SUITE 630
FT. LAUDERDALE FL 33308
US

2. Principal Place of Business

2755 E. Oakland Pk. Blvd.

3. Mailing Address

2755 E. Oakland Pk Blvd.

Suite, Apt. #, etc.

101

Suite, Apt. #, etc.

101

City & State

Ft. Lauderdale, FL.

City & State

Ft. Lauderdale, FL

Zip

33306

Country

USA

Zip

33306

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0006333

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SADRIWALLA, DEBORAH
3070 NE 40TH CT.
FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name

SADRIWALLA, ABBAS

Street Address (P.O. Box Number is Not Acceptable)

2755 E. Oakland Pk. Blvd.

Suite 101

City

Ft. Lauderdale

FL

Zip Code

33306

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Abbas A. Sadriwalla

07/10/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------------|--|
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | SADRIWALLA, DEBORAH | |
| STREET ADDRESS | 3070 NE 40 COURT | |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33308 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input checked="" type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|---------------------------------|---|
| TITLE | D | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | SADRIWALLA, DEBORAH | |
| STREET ADDRESS | 2755 E. Oakland Pk. Blvd. # 101 | |
| CITY-ST-ZIP | Ft. Lauderdale, FL. 33306 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. I hereby 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 information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Deborah A. Sadriwalla

REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-10-2000

Date

(954) 566-0004

Daytime Phone #

(154) (13/00)

ADS ASSOCIATES, INC.

2755 E. Oakland Park Blvd., Suite 101
Ft. Lauderdale, Fl. 33306
Tel. 954-566-0004 Fax. 954-566-0992

Attachment
of #595293
DW69957

July 10, 2000

Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314


Re: 2000 Uniform Business Report:

To Whom It May Concern:

We did not receive the initial 2000 Uniform Business Report, and would have filed the report and paid timely, had we received it.

Attached are the signed report and our check for \$150.00.

Thank you for your cooperation.


Deborah Sadriwalla
President