2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 04, 2005 8:00 am Secretary of State **DOCUMENT # K05953** 05-04-2005 90204 001 ***900.00 ADS & IMAGES, INC. Principal Place of Business Mailing Address 66015133 36181 EAST LAKE ROAD 36181 EAST LAKE ROAD #185 #185 PALM HARBOR, FL 34685 PALM HARBOR, FL 34685 US 04282005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number <u>59-286</u>2266 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARBOSA, GARY DO NOT WRITE 36181 EAST LAKE ROAD # 1850 PALM HARBOR, FL 34685 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE SARY J. BARBOSA Signature, typed or printed name of registered agent and title if applicable red Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DPS TILE NAME BARBOSA, GARY J. STREET ACCRESS 36181 EAST LAKE ROAD CITY-ST-ZIP PALM HARBOR, FL 34685 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TILE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

SIGNATURE: _		RRY J.	BARBOLA	4/28/05	727-787-210-8
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING	OFFICER OR DIRECTOR	1	Date	Daytime Phone #