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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # K11919

(3)

A D J, INC.

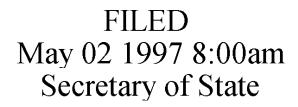
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Principal Place of Business

Mailing Address

3818 MANATEE AVE W. BRADENTON FL 34205

3818 MANATEE AVE W. **BRADENTON FL 34205-1714** 





		_								
							<ol> <li>Date Incorporated or Qualified</li> <li>01/14/1988</li> </ol>	01/14/1988 05/01/1996		
	ace of Business	ļ	Malling Address				4. FEI Number	<b></b>	Applied For	
21	и	[26]	Code And H -to				65-0029989		Not Applicabl	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	1 7	Additional Required	
City & State		[27]	City & State						_ <del></del>	
23		28	City & State				6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees	
Zip	Country	[28]	Zip	1 0	ountry	,	<del></del>			
24	25	29	F4.	30	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	8. This corporation has liability for in Florida Statutes	tangible tax under	8. 199.032,	
	9. Name and Address of Cu		stered Agent	[30]	-T		10. Name and Address of New Reg			
MATI	HEWS, D. TURNER				81	Name				
2620 MANATEE AVE W.					00 51			<del></del>		
BRADENTON FL 34205					82	Street	Address (P.O. Box Number is Not Acceptable	;)		
OT UT	2411011 1 E 04200				В3					
					<u></u>			· · · · · · · · · · · · · · · · · · ·		
					84	City		FL 85 Zip	o Code	
11 Presugnit	n the provisions of Sections 607	0502 and 6	507 1508 Florida Statut	tes the	abov	e-named	corporation submits this statement for the puporation's board of directors. I hereby accept		its registers	
SIGNATURE	Signature, typed or printed name of registere	d agent and till	d applicable. (NO)	L. Regist	erad Aq	ent signature	e raquired when reinstating)	DATÉ		
12.	OFFICERS	AND DIRE	CTORS	18	3,		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12	
TITLE	PD		DELETE	1.	1 TITLE			Change	Addit	
NAME	MCCLELLAN, DOROTHY IR	ene		1.3	2 NAME					
STREET ADDRESS	3818 MANATEE AVENUE			1.3	a STREET	ADDRESS				
CITY-ST-ZIP	BRADENTON FL			1.4	4 CITY-S	ST - ZiP				
TITLE			DELETE	2.	1 TITLE			Change	Addit	
NAME				2.	2 NAME					
STREET ADDRESS				2.3	3 STREET	I ADDRESS				
CITY-ST-ZIP				2.	4 CITY-	ST-2IP				
TITLE			☐ DELETE	3.1	TITLE			☐ Change	Addili	
NAME				3.	2 NAME					
STREET ADDRESS				3.3	3 STREET	ADDRESS				
CITY-ST-ZIP				3 -	4. CITY-	ST-ZIP				
TITLE	7		☐ DELETE	4.1	TITLE			☐ Change	Addit	
NAME				4.	2 NAME			•		
STREET ADDRESS	•			4.3	3 STREET	I ADDRESS				
CITY-ST-ZIP			T-1-22		4 CITY - S	ST-ZIP				
TITLE			☐ DELETE		1 TITLE			Change	L_ Addil	
, NAME					2-NAME					
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP			T pourse.		4 CITY-S	S1 - 71P				
TITLE			DELETE	- 1	THLE			☐ Change	Addit	
NAME					2 NAME					
STREET ADDRESS						I ADDRESS				
CITY-ST-Z#P			<del></del>	6.	4 CITY - S	ST-ZIP	<u> </u>			

To 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 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 an attachment with an address.