2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001427

Entity Name: AMERICAN DEBT SOLUTIONS, INC.

FILED May 03, 2004 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3075 S.FEDRAL HWY DELRAY, FL 33483				3075 S.FEDERAL HWY DELRAY BEACH, FL 33483		
Current Mailing Address:				New Mailing Address:		
3075 S.FEDRAL HWY DELRAY, FL 33483			3075 S.FEDERAL HWY DELRAY BEACH, FL 33483			
FEI Number: 3	31-1776611	FEI Number Applied For()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22 STREET 4TH FL MIAMI, FL 33145 US 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.						
SIGNATUR		ic Signature of Registered Agent				 Date
				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () KRONER, BURT 6474 ENCLAVE BOCA RATON, I	WAY		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D () HODGSON, THO 3540 NW 53RD BOCA RATON, I	ST.		Title: Name: Address: City-St-Zip:		(X) Change()Addition THOMAS MOORE RD, APT 1-202 N, FL 33496
Title: Name: Address: City-St-Zip:	SD () SWETNAM, SHI 8267 BERMUDA BOYNTON BEA	A SOUND WAY		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	T () KLEIN, MICHAE 3075 S. FEDER DELRAY, FL 33	AL HWY		Title: Name: Address: City-St-Zip:	D BROWN, HO 9806 LAGO BOYNTON E	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D ROSENBAU 115 WASHII HOBOKEN,	NGTON STREET, #2
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	634 NW 13T	()Change(X)Addition HRISTOPHER 'H STREET, #15 IN, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOLLY BROWN, CRAIG ROSENBAUM, CHRISTOPHER D 05/03/2004

ALAN BRESSLER, DIRECTOR 6013 NW 23RD AVENUE BOCA RATON, FL 33496