

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 12, 2005
Secretary of State

DOCUMENT# N98000003986

Entity Name: ADRUH, INC.

Current Principal Place of Business:3500 N. STATE RD. 7
STE 201
LAUDERDALE LAKES, FL 33319 US**New Principal Place of Business:**2330 NW 180TH TERRACE
MIAMI GARDENS, FL 33056 US**Current Mailing Address:**3500 N. STATE RD. 7
STE 201
LAUDERDALE LAKES, FL 33319 US**New Mailing Address:**P.O. BOX 834395
WEST HOLLYWOOD, FL 33083 US

FEI Number: 65-0849128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: PEAN, MICHELLE
Address: 3500 N. STATE RD. 7
City-St-Zip: LAUDERDALE LAKES, FL 33319Title: V () Delete
Name: VIXAMAR, ALOURDES
Address: 3500 N. STATE RD. 7
City-St-Zip: LAUDERDALE LAKES, FL 33319Title: ST () Delete
Name: DORELUS, WILFRID
Address: 2330 NORTHWEST 180TH TERRACE
City-St-Zip: CAROL CITY, FL 33056Title: TD () Delete
Name: LOUIDOR, FRANCOIS
Address: 2330 NORTHWEST 180TH TERRACE
City-St-Zip: CAROL CITY, FL 33056Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: CELIMA, JOANES
Address: 820 NW 142ND STREET
City-St-Zip: MIAMI, FL 33168Title: V (X) Change () Addition
Name: NICOLEAU, ALIX
Address: 2330 NW 180TH TERRACE
City-St-Zip: MIAMI GARDENS, FL 33056Title: T (X) Change () Addition
Name: BEAUBRUN, HERIBERT
Address: 1217 NE 5TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33304Title: D (X) Change () Addition
Name: CELIMA, GILBERTE
Address: 820 NW 142ND STREET
City-St-Zip: MIAMI, FL 33168Title: S () Change (X) Addition
Name: PAPILLON, VENCHES J
Address: 1610 NW 179 TERRACE
City-St-Zip: MIAMI GARDENS, FL 33169

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: VENCHES J PAPILLON

S

10/12/2005

Electronic Signature of Signing Officer or Director

Date