2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2008
Secretary of State

DOCUMENT# P01000079068

Entity Name: ADA COMPLIANCE SPECIALISTS, INC.

Current Principal Place of Business:

6767 SW 144 ST.
MIAMI, FL 33158

New Principal Place of Business:

Current Mailing Address:

PO BOX 416522
MIAMI BEACH, FL 33141

New Mailing Address:

6767 SW 144 ST.
MIAMI, FL 33158

FEI Number: 65-1131390 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVID GOLDFARB
6767 SW 144 ST.
MIAMI, FL 33158 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete
Name: GOLDFARB, DAVID
Address: 6767 SW 144 ST.
City-St-Zip: MIAMI, FL 33158

Title: SD ( ) Delete
Name: GOLDFARB, SHARON
Address: 6767 SW 144 ST.
City-St-Zip: MIAMI, FL 33158

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON GOLDFARB SD 08/07/2008

Electronic Signature of Signing Officer or Director Date