

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000075097

Entity Name: ADR USA, INC.

FILED  
May 01, 2003  
Secretary of State

## Current Principal Place of Business:

318 INDIAN TRACE #242  
WESTON, FL 33326

## New Principal Place of Business:

1381 COTTONWOOD CIRCLE  
WESTON, FL 33326

## Current Mailing Address:

318 INDIAN TRACE #242  
WESTON, FL 33326

## New Mailing Address:

1381 COTTONWOOD CIRCLE  
WESTON, FL 33326

FEI Number: 74-3051957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OLIVA, WALTER  
1389 HARBORSIDE DR  
WESTON, FL 33326

## Name and Address of New Registered Agent:

DOMINGUEZ, GERMAN  
1381 COTTONWOOD CIRCLE  
WESTON, FL 33326

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: GERMAN DOMINGUEZ

05/01/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OLIVA, WALTER  
Address: 1389 HARBOURSIDE DR  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DOMINGUEZ, GERMAN  
Address: 1381 COTTONWOOD CIRCLE  
City-St-Zip: WESTON, FL 33326

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOMINGUEZ, GERMAN

P

05/01/2003

Electronic Signature of Signing Officer or Director

Date