


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2005 8:00 am
Secretary of State

03-22-2005 90016 025 ***150.00

DOCUMENT # P02000080413 1. Entity Name ADC ADVERTISING, INC.	
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Principal Place of Business 1701 W. HILLSBORO BOULEVARD SUITE 102 DEERFIELD BEACH, FL 33422	Mailing Address 1701 W. HILLSBORO BOULEVARD SUITE 102 DEERFIELD BEACH, FL 33422
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20023926

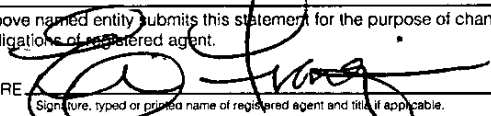
2. Principal Place of Business 758 NE 13th Ct Suite, Apt. #, etc. Suite #5 City & State Ft. Lauderdale, FL Zip 33304 Country USA	3. Mailing Address 758 NE 13th Ct Suite, Apt. #, etc. Suite #5 City & State Ft. Lauderdale, FL Zip 33304 Country USA
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03152005 Chg-P CR2E034 (10/03)

4. FEI Number 05-0524450	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FRANQUI, ERICA 23123 ST. RD 7 SUITE 34B BOCA RATON, FL 33428	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite 351 City FL Zip Code
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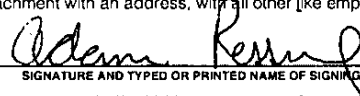
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) DATE: 3/15/05

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RESSING, ADAM 1701 W. HILLSBORO BOULEVARD, SUITE 102 DEERFIELD BEACH, FL 33422	TITLE NAME STREET ADDRESS CITY-ST-ZIP	758 NE 13th Ct, #5 Ft. Lauderdale, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  3/15/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #