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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000123774 1. Entity Name A ADULT SERVICES, INC.																																																																																																																																																
Principal Place of Business 334-49TH STREET SOUTH ST PETERSBURG, FL 33707			Mailing Address 334-49TH STREET SOUTH ST PETERSBURG, FL 33707																																																																																																																																													
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Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																														
City & State		City & State																																																																																																																																														
Zip		Country		Zip																																																																																																																																												
6. Name and Address of Current Registered Agent OLSEN, J.B. 334-49TH STREET SOUTH ST PETERSBURG, FL 33707				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																																																																																																																																												
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reporting)																																																																																																																																																
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees				10. CR2003 500012032003 02/12/03--01073--007																																																																																																																																												
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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 as other like empowered.																																																																																																																																																
SIGNATURE: JACK B. OLSEN 2/9/03 (627) 323-4266 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																																																