

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000050324

Entity Name: ADOME, INC.

FILED
Oct 24, 2006
Secretary of State

Current Principal Place of Business:

290 BAL BAY DR.
#203
BAL HARBOUR, FL 33154

Current Mailing Address:

290 BAL BAY DR.
#203
BAL HARBOUR, FL 33154

New Principal Place of Business:

9553 HARDING AVE
#201
SURFSIDE, FL 33154

New Mailing Address:

9553 HARDING AVE
#201
SURFSIDE, FL 33154

FEI Number: 20-0016670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORDEN, ROBERT
290 BAL BAY DR.
#203
BAL HARBOUR, FL 33154 US

Name and Address of New Registered Agent:

BORDEN, ROBERT
9553 HARDING AVE
#201
SURFSIDE, FL 33154 US

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: ROBERT BORDEN

10/24/2006

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: P () Delete
Name: BORDEN, ROBERT
Address: 290 BAL BAY DR. #203
City-St-Zip: BAL HARBOUR, FL 33154

Title: D () Delete
Name: OREN, ELIE
Address: 290 BAL BAY DR. #203
City-St-Zip: BAL HARBOUR, FL 33154

Title: D (X) Delete
Name: BORDEN, FLORY
Address: 290 BAL BAY DR., #203
City-St-Zip: BAL HARBOUR, FL 33154

Title: D (X) Delete
Name: BORDEN, ADAM
Address: 240 BAL BAY DR #203
City-St-Zip: BAY HARBOUR, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BORDEN, ROBERT
Address: 9553 HARDING AVE #201
City-St-Zip: SURFSIDE, FL 33154

Title: D (X) Change () Addition
Name: OREN, ELIE
Address: 9553 HARDING AVE #201
City-St-Zip: SURFSIDE, FL 33154

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 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: ROBERT BORDEN

P

10/24/2006

Electronic Signature of Signing Officer or Director

Date