


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 8:00 am
Secretary of State

01-07-2005 90016 041 ***150.00

DOCUMENT # P03000072551 1. Entity Name A.D. MARKETING INTERNATIONAL CORP.					
Principal Place of Business 3860 SW 130TH AVE. MIAMI, FL 33175				Mailing Address 3860 SW 130TH AVE. MIAMI, FL 33175	
2. Principal Place of Business 14271 SW 30TH ST. Suite, Apt. #, etc.		3. Mailing Address 14271 SW 30TH ST. Suite, Apt. #, etc.			
City & State MIAMI, FL.		City & State MIAMI, FL.		4. FEI Number 55-0838333	
Zip 33175		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DONADO, ALVARO L 3860 SW 130TH AVE MIAMI, FL 33175				7. Name and Address of New Registered Agent Name DONADO ALVARO L Street Address (P.O. Box Number is Not Acceptable) 14271 SW 30TH ST. City MIAMI FL Zip Code 33175	
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 <i>[Signature]</i> 1-4-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
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		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD DONADO, ALVARO L <input type="checkbox"/> Delete 3860 SW 130TH AVE. MIAMI, FL 33175		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DONADO, ALVARO L 14271 SW 30TH ST. MIAMI, FL. 33175	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DONADO, JACQUELINE E <input type="checkbox"/> Delete 3860 SW 130TH AVE. MIAMI, FL 33175		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DONADO JACQUELINE E 14271 SW 30TH ST. MIAMI, FL. 33175	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1-4-05 786-286-7472 <small>Date Daytime Phone #</small>		