2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129192

Entity Name: ADEL GENERAL SERVICES, CORP.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2217 NE 14TH AVENUE #01 WILTON MANORS, FL 333052305

Current Mailing Address: New Mailing Address:

3223 NE 12TH STREET APT#5E 2217 NE 14TH AVENUE #01 POMPANO BCH, FL 33062 WILTON MANORS, FL 333052305

FEI Number: 20-1613155 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ADRIANO DE OLIVEIRA, ADALBERTO 2217 NE 14TH AVENUE #01 WILTON MANORS, FL 333052305 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: Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PVTS** () Delete Title: (X) Change () Addition

ADRIANA DE OLIVEIRA, ADALBERTO ADRIANO DE OLIVEIRA, ADALBERTO Name: Name: 2247 NE 14TH AVE., #01 2217 NE 14TH AVENUE #01 Address: Address:

City-St-Zip: WILTON MANORS, FL 333052305 City-St-Zip: WILTON MANORS, FL 333052305

Title: Title: (X) Change () Addition () Delete Name: Name:

ADRIANO DE OLIVEIRA, ADALBERTO ADRIANA DE OLIVEIRA, ADALBERTO 2247 NE 14TH AVE., #01 Address: 2217 NE 14TH AVENUE #01 Address: WILTON MANORS, FL 333052305 WILTON MANORS, FL 333052305 City-St-Zip: Citv-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ADALBERTO ADRIANO DE OLIVEIRA **PVTS** 04/30/2007