2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146290

City-St-Zip:

BOCA RATON, FL 33487

Entity Name: AMC ADULT SERVICES, INC.

FILED Apr 16, 2007 Secretary of State

Littly Nai	ine. Alvic A	ADOLT SERVICES, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
6421 N.W. 42ND COURT CORAL SPRINGS, FL 33067				4471 BRANDYWINE DRIVE BOCA RATON, FL 33487			
Current M	lailing Add	ress:	New M	New Mailing Address:			
10786 N.W SUNRISE,	V. 53RD ST FL 33351	REET		4471 BRANDYWINE DRIVE BOCA RATON, FL 33487			
FEI Number:	: 20-3764501	FEI Number Applied For () FEI Number Not	Applicable ()	Certificate of Status Desire	ed ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SUITE 250 FT LAUDE The above in the State	EDERAL HIGHT) ERDALE, FL I named ent e of Florida.	GHWAY . 33304 US ity submits this statement for	the purpose of changi	ng its register	ed office or registered agent,	or both,	
SIGNATU		Oissant of Davids	I A		Data		
		ronic Signature of Registered cing Trust Fund Contribution ().	-	ONS/CHANG	Date BES TO OFFICERS AND DI	RECTORS:	
Title: Name: Address: City-St-Zip:		() Delete SEPH JR. 42ND COURT RINGS, FL 33067	Title: Name: Address: City-St-Z	p:	() Change () Addition		
Title: Name: Address: City-St-Zip:		() Delete SEPH SR. TH STREET BEACH, FL 33062	Title: Name: Address: City-St-Z		(X) Change () Addition FALIE L 42ND COURT PRINGS, FL 33067		
Title: Name: Address:	S LOIACONO 4471 BRAN	()Delete , JOSEPH P DYWINE DRIVE	Title: Name: Address:		() Change () Addition		

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.

City-St-Zip:

SIGNATURE: JOSEPH LOIACONO SEC 04/16/2007