## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000157000

Entity Name: ADP SURFACES, INC

FILED Jan 17, 2007 Secretary of State

| Current Principal Place of Business:  7159 ROSE AVENUE ORLANDO, FL 32810  Current Mailing Address:  New Mailing Address:  Replay Buick AVENUE ORLANDO, FL 32808  FEI Number 20-3864919  FEI Number Applied For ( )  FEI Number Not Applicable ( )  Certificate of Status Desire  Name and Address of New Registered Agent:  Name and Address of New Registered Agent:  DIGLIO-BENIKIRAN, MICHELE ESQ. 1999 WEST COLONIAL DRIVE  #204  ORLANDO, FL 32804 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIR  Title:  D ( ) Delete Name:  661 LONGWOOD, FL 32779  Title:  D ( ) Delete Name:  671 LONGWOOD, FL 32779  Title:  D ( ) Delete Name:  PIZAM, HAIM CY Name:  PIZAM, HAIM CY Name:  PIZAM, HAIM CY Name:  PIZAM, ESTHER  Address:  City-St-Zip:  MAITLAND, FL 32803  Name:  Address:  City-St-Zip:  MAITLAND, FL 32751  MAITLAND, FL 32751  MAITLAND, FL 32751  New Mailing Address:  ORLANDO, FL 32751  Replay Buick AVENUE  Registered Agent:  Name:  N | Littly Nai   | IIIE. ADF SUR                   | TACES, INC.                    |                    |   |   |  |
|--|--|---------------------------------|--------------------------------|--------------------|---|---|--|
| Current Mailing Address:  New Mailing Address:  7159 ROSE AVENUE ORLANDO, FL 32810  Selection Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  Title:  D   | Current Principal Place of Business:                     |                                 |                                |                    | New Principal Place of Business:          |   |  |
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| Name and Address of Current Registered Agent:  DIGLIO-BENKIRAN, MICHELE ESQ. 1999 WEST COLONIAL DRIVE #204 ORLANDO, FL 32804 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Date    Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:    ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:   ADDITIONS/CHANGES TO OFFIC |  |                                 |                                |                    |   |   |  |
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| 1999 WEST COLONIAL DRIVE #204 ORLANDO, FL 32804 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Date   | Name and Address of Current Registered Agent:            |                                 |                                |                    | Name and Address of New Registered Agent: |   |  |
| in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title:  D () Delete  Name: FULP, KEVIN  Address: 661 LONGWOOD CIRCLE City-St-Zip: LONGWOOD, FL 32779  Title: D () Delete  Title: City-St-Zip: LONGWOOD, FL 32803  Title: City-St-Zip: City-St-Zip: Title: City-St-Zip: Title: City-St-Zip: Title: City-St-Zip: City-St-Zip: Title: City-St-Zip: City-St-Zip: Title: City-St-Zip: City-St-Zip: City-St-Zip: Title: City-St-Zip: City-St-Zip: Title: City-St-Zip: City-St-Zip: Title: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: Address: City-St-Zip: City-St-Zip: Address: City-St-Zip: City-St-Zip: Address: City-St-Zip: City | 1999 WES<br>#204   | ST COLOŃIAL [                   | DRIVE                          |                    |   |   |  |
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| Title: D () Delete Title: D (X) Change () Addition Name: FULP, KEVIN Address: 661 LONGWOOD CIRCLE Address: 661 LONGWOOD, FL 32779  Title: D () Delete Title: () Change () Addition Name: Address: 661 LONGWOOD, FL 32779  Title: D () Delete Title: () Change () Addition Name: Address: ORLANDO, FL 32803  Title: D () Delete Title: () Change () Addition Name: Address: () City-St-Zip: City-St-Zip: () Change () Addition Name: Address: () City-St-Zip: () Change () Addition Name: Address: () Change () Addition Name: () Change () Address: () Change () Addition Name: () Change () Address: () Change () Addition Name: () Change () Address: () Change () Addition Name: () Change () Address: () Change () Address: () Change () Addition Name: () Change () Address: () Change () Change () Address: () Change () | Election Car   | mpaign Financing                | Trust Fund Contribution ( ).   |                    |   |   |  |
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| Name:         PIZAM, HAIM CY         Name:           Address:         1021 EAST HARWOOD STREET         Address:           City-St-Zip:         ORLANDO, FL 32803         City-St-Zip:           Title:         D () Delete         Title: () Change () Addition           Name:         PIZAM, ESTHER         Name:           Address:         170 NOTTOWAY TRAIL         Address:   | Name:<br>Address:  | FULP, KEVIN<br>661 LONGWOO      | D CIRCLE                       | Name:<br>Address:  | FULP, KE\<br>661 LONG                     | VIN<br>MEADOW CIRCLE                    |  |
| Name: PIZAM, ESTHER Name: Address: 170 NOTTOWAY TRAIL Address:   | Name:<br>Address:  | PIZAM, HAIM C'<br>1021 EAST HAF | Y<br>RWOOD STREET              | Name:<br>Address:  | p:  | () Change () Addition                   |  |
|  | Name:<br>Address:  | PIZAM, ESTHER<br>170 NOTTOWA    | R<br>Y TRAIL                   | Name:<br>Address:  | p:  | () 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.

SIGNATURE: KEVIN FULP D 01/17/2007