


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2005 8:00 am**  
**Secretary of State**

04-26-2005 90148 041 \*\*\*158.75

<b>DOCUMENT # P93000025899</b>					
<b>1. Entity Name</b> <b>ADVENTURES IN ADVERTISING/BDPI BUSINESS DEVELOPMENT PREMIUMS, INC.</b>					
<b>Principal Place of Business</b> 1440 CORAL RIDGE DR. 346 CORAL SPRINGS, FL 33071 US			<b>Mailing Address</b> 1440 CORAL RIDGE DR. 346 CORAL SPRINGS, FL 33071 US		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> <b>65-0405185</b>	
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
<b>MILLER, JOSEPH</b> <b>1440 CORAL RIDGE DR, #346</b> <b>POMPANO BEACH, FL 33071</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
<b>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.</b>					
SIGNATURE <u>Joseph Miller</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			SIGNATURE <u>Joseph Miller</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete <b>MILLER, JOSEPH</b> <b>3700 NW 124TH AVE</b> <b>POMPANO BEACH, FL 33071</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>MILLER, JOSEPH</b> <b>1440 CORAL RIDGE DR # 346</b> <b>CORAL SPRINGS FL 33071</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	C <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>MILLER, MARSHA</b> <b>1440 CORAL RIDGE DR. #346</b> <b>CORAL SPRINGS FL 33071</b>	
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	
<b>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.</b>					
<b>SIGNATURE:</b> <u>Joseph Miller</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>4/05/05</u> Daytime Phone # <u>954 255-3044</u>		

# ATTACHMENT

# State of Florida

H0066910



## Department of State

I certify from the records of this office that ADVENTURES IN ADVERTISING (AIA) / LOGOTOOLS, INC. is a corporation organized under the laws of the State of Florida, filed on April 8, 1993.

The document number of this corporation is P93000025899.

I further certify that said corporation has paid all fees due this office through December 31, 2004, that its most recent annual report/uniform business report was filed on February 12, 2004, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Fourteenth day of April, 2005



CR2EO22 (2-03)

*Glenda E. Hood*  
Glenda E. Hood  
Secretary of State