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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300063166 (1)

ADHALL, INC.

Principal Prace of Business Mail

48 NORTH WASHINGTON BLVD. STE. 48 - 9 SARASOTA FL 34237

SIGNATURE:

Mailing Address

46 NORTH WASHINGTON BLVD. STE.-48 29 SARASOTA FL 34238-5928

FILED Feb 19 1997 8:00am Secretary of State



SARASOTA PL		04100			Date of Last Report 03/26/1996
	ace of Bysiness rth Washington Blvd.	26. Mailing Address 26. 44. Nov. H. W.	ashinath Bl	4. FEI Number	Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 23 Y35	ota Florida	City & State 28 Savasota, F	Florida	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 342	36 25 Country	29 3423L-5928	Country	8. This corporation has liability for intang	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
46 N Ste.	Y, JE Orth Washington BLVD. 18/ 29 Asota FL 34237		81 Name 82 Street Ad 83 Su 84 City	idjess (P.O. Box Number is Not Acceptable) Verth Washington Blyd. It 29	EL 85 Zip Code 34.234-5928
office or re agent 1 ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State or in familiar with, and accept the obligat	if Florida. Such change was au	ithorized by the corpor	propration submits this statement for the purpose ration's board of directors. I hereby accept the	e of changing its registered appointment as registered
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable (NOTE	Registered Agent signature rec	quired when reinstating) DA	TE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	DECHOW, GERALD A 10 SOUTH JEFFERSON STREET ROANOKE VA 24011	r STE. 1100		1415 Electric Road	1014-2923
CITY - ST - ZIP TITLE	NOMIONE TA 24011	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Roanoke, Virginia 24	Change Addition
		had policy	22 NAME	•	C. Austrillo
NAME DEGEST ADDRESS					
STREET ADDRESS			2.3 STREET ADDRESS		
CITY ST-7IP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
THILE		C DETELE			C charge C Nanada
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 C(TY - ST - Z)P		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAMÉ			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - \$1 - ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-Z#P		4	6.4 CITY - ST - ZIP		
14 Ldo berer	by certify that the information supplied	with this fling does not qualify	for the exemption sta	ted in Section 119.07(3)(i), Florida Statutes. I fu	irther certify that the
informatio Lam an ol appears i	in indicated on this annual poport of su flicer or director of the corporation or t in Block 12 or Block 13 inchanged, or	ipplemental annual report is tri he receiver pr trustee embowe on an attachment with an addi	ue and accurate and the ered to execute this repress.	nat my signature shall have the same legal effe port as required by Chapter 607, Florida Statute	ct as it made under oath; that es; and that my name