

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 MAY -1 PM 2:36

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Linda B. Nathan
Secretary of State
TALLAHASSEE, FLORIDA

DOCUMENT # P94000051257 (1)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ADAMCO INDUSTRIES, INC.

Principal Office Location: **1436 SILVERTHORN DRIVE ORLANDO FL 32825**
 Mailing Address: **1436 SILVERTHORN DRIVE ORLANDO FL 32825**

DO NOT WRITE IN THIS SPACE

2. Director of the Corporation		2a. Mailing Address		3. Date of Incorporation (or subject)		3a. Date of Last Report	
21	1434 SILVERTHORN DRIVE	26	1434 SILVERTHORN DRIVE	07/07/1994			
4. FID Number		5. Certificate of Status Issued		6. Election Campaign Financing Trust Fund Contribution		7. Additional Fee Required	
21		26		59-3254287		\$8.75 Additional Fee Required	
23		28				\$5.00 May Be Added to Fees	
24		25		29		30	
8. The corporation is liable for interstate tax under the Florida Franchise Tax Act				9. The corporation is liable for interstate tax under the Florida Franchise Tax Act			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CHRYSOCHOS, NICHOLAS 1736 BUCKHORN PLACE ORLANDO FL 32825				B1 Name			
				B2 Street Address (P.O. Box Number is Not Applicable)			
				B3			
				B4 City			
				FL B5 Zip Code			

11. Pursuant to the provisions of Section 607.01, Florida Statutes, and Section 607.02, Florida Statutes, this statement for the purpose of changing its registered office of principal office or both in the State of Florida, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am licensed with and accept these obligations as set forth in Florida Statutes.

SIGNATURE: _____ (Signature of Agent) _____ (Signature of Director)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
1. NAME	D MOLIMIS, ANTONIO	1. NAME	D MOLIMIS, ANTONIO
2. STREET ADDRESS	1436 SILVERTHORN DRIVE	2. STREET ADDRESS	1434 SILVERTHORN DRIVE
3. CITY	ORLANDO FL 32825	3. CITY	ORLANDO FL 32825
4. NAME	D ADAM, CATHERINE	4. NAME	D ADAM, CATHERINE
5. STREET ADDRESS	1436 SILVERTHORN DRIVE	5. STREET ADDRESS	1434 SILVERTHORN DRIVE
6. CITY	ORLANDO FL 32825	6. CITY	ORLANDO FL 32825
7. NAME		7. NAME	
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY		9. CITY	
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY		12. CITY	
13. NAME		13. NAME	
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY		15. CITY	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for the corporation stated as has been filed in the Florida Statutes. I further certify that the information is true and correct as of the date of filing and that the corporation is in good standing with the State of Florida. I am a resident of the State of Florida and I am qualified to accept the appointment as registered agent for the corporation. I am licensed with and accept these obligations as set forth in Florida Statutes.

SIGNATURE: *Antonio Molimis* ANTONIO MOLIMIS 24 April 1995 (407)3805353