FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400085887 (5)

FILED Mar 14 1997 8:00am Secretary of State

ADRO C	CORP.						
Principal Place of Business WALLACE KANDELL 10578 STONEBRIDGE BLVD BOCA RATON FL 33498		9	Mailing Address WALLACE KANDELL 10578 STONEBRIDGE BLVD BOCA RATON FL 33498-2004				
BOOM MATON	FC 35450		NON IINION TE OUTOUR				3. Date Incorporated or Qualified 3a. Date of Last Report 11/28/1994 03/11/1996
2. Principal P	lace of Business	28	2a. Mailing Address				4. FEI Number Applied For
21		26]				65-0536579 Not Applicab
Suite, Apt. #, etc.		27	Suite, Apt #, etc.				5. Certificate of Status Desired See Required Fee Required
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	-	Zıp	Coun	try		8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	1	30			Florida Statutes
	9. Name and Address of Currer		J. L. 14 tr				10. Name and Address of New Registered Agent
KAN	IDELL, WALLACE			8	81	Name	
10578 STONEBRIDGE BLVD BOCA RATON FL 33495					82	Street Addre	ress (P.O. Box Number is Not Acceptable)
600	DA RATON FE 33493			8	93		
				1	84	Cily	FI 85 Zip Code
11. Pursuant office or reagent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig)2 and eof Ltor ations ∈	607.1508, Florida Statut rida. Such change was of, Section 607.0505. Fl	les, the abo authorized orida Statu	ove by	e-named corporations.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATURE							red when reinstalling) DATE
12.	Signature, typed or printed name of registered age OFFICERS AN			1 Hegistered	Age	m signature require	red when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	() ()	DELETE	11 1111	ŧ	T	Change Addition
NAME	KANDELL, WALLACE			1.2 NAM	ΛE		
STREET ADDRESS	10578 STONEBRIDGE BLVD			1.3 STR	LET	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL			1.4 0(1)	Y - S	T - ZIP	
TITLE		••	DELETE	21 III L			Change Addition
NAME				2.2 NAM	ΝE		
STREET ADDRESS				2.3 STR	EE 1	ADDRESS	
CITY-ST-ZIP				2. 4 CIT	Y-S	61-ZIP	
TITLE			DELETE	3.1 1171	.E		Change Addition
NAME				3 2 NAN	ΝE		
STREET ADDRESS				3 3 S I R	133	ADDRESS	
CITY-ST-ZIP				3.4 CIT		61 - 21P	Character Laboratory
TITLE			DELETE	4.1 7(1)			Change Addition
NAME				4. 2 NA			
STREET ADDRESS				- 1		ADDRESS	
CITY-ST-ZIP			DELETE	4.4 CiT* 5.1 Till		1-ZIP	Change Addition
TITLE				5.2 NAN			C onergy C round
NAME OTOSST ADDRESS						ADDRESS	
STREET ADDRESS				l l			
CITY-\$T-ZIP			DELFTE	5.4 CIT		1-11	Change Addition
NAME			Pres 11.16	6.2 NAM			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP				6.4 CIT			
	by certify that the information supplic	d with	this filing does not qual				d in Section 119.07(3)(i). Florida Statutes. I further certify that the

nereuy cerny mature information supplied win this filling does not quarity for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address