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 # P95000026325 (7)

ADPARK CORPORATION

Principal Place of Business 9744 SW 124 TERRACE MIAMI FL 33178 Mailing Address

9744 SW 124 TERRACE MIAMI FL 33178-4938

FILED May 19 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified 03/30/1995		e of Last F 1/1996	₹eport	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
21		26			NOT APPLICABLE		N	ot Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	v	+	Additional equired	
City & Stat	θ	City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28			Trust Fund Contribution			to Fees	
Zip	Country	Zip	Countr	У	8. This corporation has liability for i	ntangible t	ax under s	s. 199.032,	
24	25 29 30			Florida Statutes					
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	pistered A	gent		
PAF	rkin, adam a		81	Nam	e				
9744 SW 124 TERRACE				82 Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL 33176				Super Addiess (F.O. Dox radiiber is not Addeptable)					
			83						
			84	City		FI.	85 Zip	Code	
office or r	registered agent, or both, in the Staten in familiar with, and accept the oblig	e of Florida. Such change was pations of, Section 607.0505, Fl	authorized b orida Statute	by the co es.	ed corporation submits this statement for the perporation's board of directors. I hereby accept	t the appo	changing intment as	is registered registered	
	Signature, type disciprinted name of registered as			gent signat	re required when reinstating)	DATE			
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE				
TOLE	0	DELETE	-1.1 TITLE		· ·		Change	Addition	
NAME	PARKIN, ADAM A		1.2 NAME						
STREET ADDRESS	9744 SW 124 TERRACE		1.3 STREE	T ADDRES	S				
CITY - 51 - 7IP	MIAMI FL 33176	7-1	1.4 CITY-	ST-ZIP			10	1.700	
TITLE		DELETE	2.1 TITLE				Change	Addition	
NAME			2.2 NAME			. "			
STREET ADDRESS			23 STREE	T ADDRES	S				
CHY-ST-ZIF		······································	2 4 CITY	-ST-ZIP					
THE	 -		3.1 TITLE				L Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	et addres	S				
CHY-ST-ZIP			3.4. CITY	- ST - ZIP					
TIFLE		DELETE	4.1 TETLE				Change	Addition	
N4ME			4. 2 NAMI	E				1	
STREET ADDRESS			4.3 STREE	T ADORES	s i				
CITY SI-ZIP			4.4 CITY-	ST-ZIP					
TILLE		DELETE	5.1 TITLE				Change	Addition	
NAME			5.2 NAME		[
STREET ADDRESS			5.3 STREE	T ADDRES	s				
CITY-S1-ZIF			5.4 CITY-						
100		DELETE	6.1 TITLE				Change	Addition	
NAME		*****	6.2 NAME				-		
STREET ADDRESS				Et addres	S				
			64 CITY-		~ 				
CITY - ST - ZIF			0411111	9("ZIP"					

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 24 1997. (305) 253 7331.