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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PROFIT CORPORATION ANNUAL REPORT 1997	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000027464 (3) 1. Corporation Name AD Directions Incorporated
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Principal Place of Business 6555 NW 36th St 114 Miami FL 33166	Mailing Address 6555 NW 36th St 114 Miami FL 33166
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 4-3-95	3a. Date of Last Report	4. FEI Number 65-0645289	Applied For Not Applicable	5. Certificate of Status Desired \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
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9. Name and Address of Current Registered Agent Lilia R. Diaz 6555 NW 36th St 114 Miami FL 33166	10. Name and Address of New Registered Agent 81 Name Antonio Feijoo 82 Street Address (P.O. Box Number is Not Acceptable) 83 6555 NW 36th St 114 84 City Miami FL 33166
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Antonio Feijoo President Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 4-10-97

12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP DP Lilia R. Diaz 1042 Aucil Ave Miami FL 33166 VP JAVIER J Diaz 1042 Aucil Ave Miami Springs FL 33166 DELETED DELETED DELETED DELETED	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP P Antonio Feijoo 1249 Heron Ave Miami FL 33166 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP VP Jose Angel Perez 1249 Heron Ave Miami FL 33166 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
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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: Antonio Feijoo Antonio Feijoo Signature and typed or printed name of signing officer or director Date 4-10-97 (205) 871-2422 Daytime Phone #

CR2E034 (9/96)