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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9500064593 (3) ADAMAS INNOVATIONS, INC.

FILED Aug 12 1997 8:00am Secretary of State

Principal Place	WEST 23RD COURT	Mailing Address 4031 NORTH WEST 23RD COCONUT CREEK FL 330			
				3. Date Incorporated or Qualif	· · · · · · · · · · · · · · · · · · ·
9 Principal P	lace of Businoss	2a. Mailing Address		08/18/1995 4. FEI Number	08/06/1996
2. Filitoipar 7	lace of Bosinoss	26		65-0627092	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			SR 75 Additional
27		27		5. Certificate of Status Desired	Fee Required
City & State	е	City & State		Election Campaign Financir Trust Fund Contribution	g \$5.00 May Be Added to Fees
Zip	Country	Ζφ	Country	8. This corporation has liability	for intangible tax under s. 199.032,
24	25	29	30	Florida Statutes	Yes No
	g. Name and Address of Curre	nt Registered Agent	81 Name /	10. Name and Address of Nev	v Registered Agent
	rrier, Lewis W III		81 Name	AMES JOYIA	<i>M</i> .
7966 SOUTH WEST 6TH STREET			82 Street Ado	diess (P.O./Box Number's Not Mos	ptable)
NOF	RTH LAUDERDALE FL 33068		83	21 IV.VV. 25 CA.	,
			84 City (OCONUT CREE	K El 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508. Florida Statut			
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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.					
	Or was and actes in the cong	- JOYA M	JAMES		8/8/91
SIGNATURE	Synature yiped or printed nayby if regulared ag	colland to e if applicable (NO)	E: Registered Agent signature requ	uired when reinstating)	DATE
12.	ØFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO C	FFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JAMES, KEVIN A		1.2 NAME		
STREET ADDRESS	4031 NORTH WEST 23RD CO	URT	1.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL 33068	Direc	1.4 CITY - ST - ZIP		
TITLE	PS 10VIIA	☐ DELETE	217171.6		Change Addition
NAME	JAMES, JOYIA		2 2 NAME		
STREET ADDRESS	4031 NW 23 COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	COCONUT CREEK FL	DELETE	2 4 CITY: ST-ZIP		Change Addition
NAME		La Mille	3.2 NAME		CT CHANGE TO MODITION
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP	•	1
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		-
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-2IP		
TITLE	, , , , , , , , , , , , , , , , , , , ,	DELETE	: 5.1 THTLE		Change Addition
NAME			5.2 NAME	•	
STREET ADDRESS			5 3 STREET ADDRESS	•	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELET E	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		(
CITY-ST-ZIP			G.4 CITY - ST - ZIP	44. A	

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.

IGNATURE: 72 X M . / Keyin A Tomos Din 1-8-97 954-968-4327