FILE NOW: FILING FEE AFTER MAY 1 18 \$550.00 **PROFIT** CORPORATION **ANNUAL REPORT**



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600014057 (9)

THE DOMAIN A.D., INC.

FILED Jun 18 1997 8:00am Secretary of State



Principal Place of Business		Mailing A	Mailing Address				T 10011001 110 10110 01111 00111 80111 00111 01101 11011 01101 80101 01111 1001 1001			
1055 E. OCEAN BLVD.		1055 E. OCEAN BLVD.								
STUART FL 34994		STUART I	FL 34996-2585							
							3. Date Incorporated or Qualified 02/14/1996	i 3a	Date of Last I	Report
2. Principal Place of Bu	usiness	 	g Address				4. FEI Number	(1012		pplied For
Suite, Apt. #, etc.		26 Suite	Apt. #, etc.				65-0735195	ノハンア		ot Applicable
22]		27	Apr. #, otc.				5. Certificate of Status Desired			Additional Required
City & State			k State				6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution			I to Fees
Zip	Country	Zip		Co	untry	,	8. This corporation has liability for	or intang	jible tax under	s. 199.032
24	25	29		30			Florida Statutes		⊠ No	
9. Nar	ne and Address of Current	Registered a	Agent		1		10. Name and Address of New	Registe	red Agent	
STOYANOFF					81	Name				
1055 E. OCE					Street Add	ress (P.O. Box Number is Not Acceptable)				
STUART FL							····			
					83					
					84	City			85 Zip	Code
						'			FL `` `	
office or registered	visions of Sections 607.0502 agent, or both, in the State of with, and accept the obligation	of Florida, Suc	th change was :	authoriza	ed by	z the corpora	poration submits this statement for that ation's board of directors. I hereby acc	ept the	se of changing appointment as	its registered s registered
SIGNATURE	ped or printed name of registered agen	Lord title d publice	tilo (NO)	F : Dissister		to the constant of the	uited wher reinstating)	DA.	TE	
12.	OFFICERS AND			13.		ant signature roqu	ADDITIONS/CHANGES TO OF			RS IN 12
TITLE PD	0,1102.107.110		DELETE		 T 1 F				☐ Change	Addition
	, MARTIN F /) Paran	\wedge	1.21	NAME					
	AST 5TH STREET	volve	y -	1.3	STREET	ADDRESS				
	RT FL 34994	wowe	a	1.4	CITY-S	ST - 71P				
TITLE VD			DELETE		TITLE				☐ Change	Addition
NAME STOYA	NOFF, DIMITER			2.2	NAME					
STREET ADDRESS 1055 6	EAST OCEAN BLVD.			2.3	STREET	ADDRESS				
CITY-ST-ZIP STUAF	RT FL 34996			2.4	CITY-:	ST-7IP				
TITLE STD		4	DELETE	3.1	TITLE				Change	Addition
	enter, James D 🥀	masi (32	NAME					
	ARNIVAL AVENUE 🥀	W. J. w.	Į.	33	STREET	ADDRESS				
CITY-ST-ZIP PORT	ST. LUCIE FL 34983 L	MP	- ,	3.4.	CITY-	S1 - ZIP				<u>_</u>
TETLE			DELETE	4.1	TITLE		•		☐ Change	Addition
NAME				4 2	NAME					
STREET ADORESS		•		43	STREET	ADDRESS				
CITY-ST-ZIP		 		4.4	CITY-S	ST - ZIP				
TITLE			DELETE	5.1	TITLE		J	U/h	Change	Addition
NAME				52	NAME			100	$^{\prime\prime}$	
STREET ADORESS				53	STREET	ADDRESS		1	σ_{\prime}	
CITY-ST-ZIP					CITY-S	ST - 7(P		_/	\ } 	
TITLE			DELETE	61	TITLE				Change	Addition
HAME				62	NAME	1				•
STREET ADDRESS				63	STAFET	ADDRESS			BK dap	3110.5
CITY-ST-ZIP				64	CITY-S	T - ZIP	·		DK Clap	165.

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.