

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000018872

Entity Name: ADNET, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

1835 E. HALLANDALE BEACH BLVD
STE 292
HALLANDALE, FL 33009 US

Current Mailing Address:

1835 E. HALLANDALE BEACH BLVD
STE 292
HALLANDALE, FL 33009 US

New Principal Place of Business:

1835 E. HALLANDALE BEACH BLVD
STE 292
HALLANDALE BEACH, FL 33009 US

New Mailing Address:

1835 E. HALLANDALE BEACH BLVD
STE 292
HALLANDALE BEACH, FL 33009 US

FEI Number: 65-0646178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANCHARD, SANDRA J
3801 S OCEAN DRIVE
#16Q
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HANCHARD, JAMES H
Address: 1835 E. HALLANDALE BEACH BLVD #292
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: HANCHARD, SANDRA J
Address: 1835 E. HALLANDALE BEACH BLVD #292
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HANCHARD, JAMES H
Address: 1835 E. HALLANDALE BEACH BLVD #292
City-St-Zip: HALLANDALE, FL 33009

Title: VP (X) Change () Addition
Name: HANCHARD, SANDRA J
Address: 1835 E. HALLANDALE BEACH BLVD #292
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES HANCHARD

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

Date