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 # P96000027425 (3)

A.D.M.E. INVESTMENT CORPORATION

Principal Place of Business	Mailing Address	****
999 WASHINGTON AVENUE MIAMI BEACH FL 33139	999 Washington Avenue Miami Beach Fl 33139-5015	

FILED Apr 23 1997 8:00am Secretary of State



City & State City & State City	999 WASHINGTON AVENUE MIAMI BEACH FL 33139		999 WASHINGTON AVENUE MIAMI BEACH FL 33139-5015							
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22 City & State 28 City & State City & City & State City & Ci		#, etc	· · · · · · · · · · · · · · · · · · ·			,			\$8.7	
28 Country Zrp Country Zrp Country R. This corporation has liability for Inangible tax under s. 199.030 Prioride Statutes Yes No.	 1		h				5. Certificate of Status Desired			
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### BBQ WASHINGTON AVENUE MIAMI BEACH FL 33139 ### BBQ Street Address (P.O. Box Number is Not Acceptable) ### BBQ City FL 85 Zip Code ### City				1901		 				
MIAMI BEACH FL 33139 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 signed and accept the obligations of, Section 607,005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered signed to an include with, and accept the obligations of, Section 607,005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered signed and accept the obligations of, Section 607,005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered signed and accept the appointment as registered of the provider of the purpose of changing was authorized by the corporation's board of directors. Thereby accept the appointment as registered stated by the corporation's board of directors. Thereby accept the appointment as registered of the purpose of changing was authorized by the corporation's board of directors. Thereby accept the appointment as registered stated by the corporation's board of directors. Thereby accept the appointment as registered stated by the corporation's board of directors. Thereby accept the appointment as registered stated by the corporation's board of directors. Thereby accept the appointment as registered stated by the corporation's board of directors. Thereby accept the appointment as registered stated by the corporation's board of directors. Thereby accept the appointment as registered as a stated and accept the appointment as registered was registered and accept the appointment as registered and accept				61	ī	Name				
### Page Page				82	2	Street Addr	ress (P.O. Box Number is Not Acceptab	le)		
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 agent, or both, in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent and are the chiling to the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and are the chiling to pretent agent and site is registation. SIGNATURE SIGNATURE Digniting light on pretent name of registered agent and site is registation. (NOTE frequency Agent signature required when remarking) ESFORMES, MORRIS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTEL BSD SIRRET ADDRESS DIV. 51. 2P MAMI BEACH FL 33139 14. OTIY-51. 2P DESNICK, AHLVA 999 WASHINGTON AVENUE 13. TITLE 13. TITLE 14. OTIY-51. 2P DESNICK, AHLVA 999 WASHINGTON AVENUE 32. NAME 33. SIREET ADDRESS GUY-51. 2P INTEL 10. OFLETE 4. TITLE 10. Change Addition AVE SIRRET ADDRESS CUY-51. 2P INTEL 10. Change Addition AVE SIRRET ADDRESS CUY-51. 2P INTEL 10. Change Addition AVE SIRRET ADDRESS SIRRET ADDR	MIAN	MI BEACH FL 33139		_	L	 				
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 train familiar with, and accept the obligations of, Sociolo 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. ITILE SEFORMES, MORRIS 999 WASHINGTON AVENUE 1. STREET ADDRESS DUTY-ST-2P ITILE DESNICK, AHUVA 999 WASHINGTON AVENUE 1. STREET ADDRESS CUTY-ST-2P ITILE DESNICK, AHUVA 999 WASHINGTON AVENUE 32 STREET ADDRESS CUTY-ST-2P ITILE DELETE 1. ITILE 1. OFFICERS 1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 4. ADDITIONS/CHANGES TO OFFICERS AND DIR				83	"					
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 agent. Lan familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. ITILE PSD				84	1	City			85 Z	p Code
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SIGNATURE	office or n	egistered agent, or both, in the State	e of Florida. Such change was	authorized b	y t	he corporat	tion's board of directors. I hereby accep	t the appo	pintment	as registered
Separative byted or primed rame of registered specified (NOTE: Registered Agent unpailure required when remailing) DATE 2. OFFICERS AND DIRECTORS III.E PSD		m raminal with, and accept the oblig	gations of, Section 607,0505, F	ionda Statole	.S.					
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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 of trust e 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 attriction with an address.

SIGNATURE:

Daytime Phone #