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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600036924 (4)

ADVANCED DIGITAL RESOURCES, INC.

FILED
Apr 28 1997 8:00am
Secretary of State

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7487 S.W. 82ND ST. NO. C-802 MIAMI FL 33143		7487 S.W. 82ND ST. NO. C-202 MIAMI FL 33143-7363				
				 Date Incorporated or Qualified 04/29/1996 	3a. Date of Last Report	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
	SLO BR STREET	26 7487 SW 82 S	otizeet	65-0660877	Not Applicable	
h		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
		27 C-202		6 , 00104.0 0, 010 0000	Fee Required	
City & State	IAMI	City & State 28 MIAMI	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 ろろい			Country	_ _	⊢Yes □ No	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
PERALES, MARIO S 81 Name						
7487 S.W. 82ND STREET No. C-202				dress (P.O. Box Number is Not Acceptab	(e)	
MIAMI FL 33143			83			
			84 City		FL 85 Zip Codo	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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			a the productive production and a contract of the second			
12.	Signature, typed or printed name of registered age OFFICERS ANI		Rogislered Agent signature roo	ADDITIONS/CHANGES TO OFFIC	DATE EDG AND DIDECTORS IN 12	
TITLE	PID	DELFTE	1 1 HTLE	ADDITIONS/CHANGES TO OFFIC	Change Addition	
NAME	PERALES, MARIO S		1.2 NAME			
STREET ADDRESS	7487 S.W. 82ND ST. #C-202		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33143		1.4 City - St - ZiP			
TITLE	SVD	DELFTE	21111116		Change Addition	
NAME	GONZALEZ, MARIA E		2.2 NAME		_ • -	
STREET ADDRESS	7487 S.W. 82ND ST. #C-202		2 3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33143		2 4 City - St - ZiP			
TITLE	a v*	☐ DELETE	31 1111.F		Change Addition	
NAME			3 2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3 4. CITY - S1 - ZIP			
TITLE		☐ DELETE	41 TITLE		Change Addition	
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZiP		<u></u>	
TITLE		☐ DELETE	51 THLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CHY+S1+ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME	•		
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		6.4 CITY - ST - ZIP			

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 trusted empty and 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 actions.

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