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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000042753 (9)

AD-JLC, INC.

FILED Apr 27 1998 8:00am Secretary of State

1 188 88 318 91 8	 	.	8 IIII 188

rincipairiac	e or business	Malling Abbress								
310 UNCOLN RD MALL SUITE 204 RIAMI BEACH FL 93139 2795 N 40 H Ave			DO NOT WRITE IN THIS SPACE							
						3. Date Incorporated or Qualified				
HULL	YWOOD PL 33	021-3024				05/13/1996				
2. Principal Pl	lace of Business	2a. Mading Address			4. FEI Number	Щ <i>і</i>	Applied For			
26 26					65-0668381	!	Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Regulred				
City & State City & State					6. Election Campaign Financing	\$5.0	O May Be			
3	28				Trust Fund Contribution		d to Fees			
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid the current	-	~		
4	25]	29	30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Curr	rent Registered Agent		<u>.</u> .1		10. Name and Address of New Registered Ag	ent			
	COBY, EZRA			81	Name			,		
940 LÍNCOLN RO MÁLL, SUITE 204				82	Street A	ddress (P.O. Box Number is Not Acceptable)				
HAMI BEACHEL 33130- 45 AVE 27 95 N. 40 45 AVE HOLLY WOUD A 33021-3024										
27	195 N. 40 =	AVE - all	ſ	B3						
	Latter wood A ?	33021- 30 -	ŀ	84	City		85 Zij	p Code		
77	, , , , , , , , , , , , , , , , , , , ,	_	ļ		Oity	FL !	21	p code		
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Sta	tutes, the at	οονε	-named c	corporation submits this statement for the purpose of cl	anging	its registered		
agent. La	egistered agent, or both, in the Siz m familiar with, and accept the ob	ate of Florida. Such criange wa ligations of, Section 607,0505.	s autnorized Florida Stat	a by ules	tne corpo s.	oration's board of directors. I hereby accept the appoin	ilment a	as registered		
SIGNATURE	,							ĺ		
SIGNATURE	Signature, typed or printed name of registored	agent and title if applicable (N	O10: Registered	1 Age	nt signature re	equired when reinstating) DATE				
12.	OFFICLRS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND D	RECTO	ORS IN 12		
TITLE	D	DELETE	1.1 7(1	ſL€	-"		Change	Addition		
NAME	JACOBI, AVI		1.2 NA	ME]			ļ		
STREET ADDRESS	2795 N 40TH AVE	/	1.3 ST	REET.	address					
CITY-ST-ZIP	HOLLYWOOD FL 3307	11-3024	1.4 Cit	1Y-S1	T-ZIP					
TITLE		DELETE	2.1 Tr	LE			Change	Addition		
NAME			2.2 NA	ME]					
STREET ADDRESS			2.3 \$1	REET	ADDRESS			i		
CITY-ST-ZIP			2.40	TY-S	T-ZIP					
TITLE		DELETE	3.1 TIT				Change	Addition		
NAME			3.2 NA	ME						
STREET ADDRESS			3.3 ST	REET	ADDRESS					
CITY-ST-ZIP			3.4. Ci	IY-S	T - 7(P					
TITLE		DELETE	4.1 (1)				Change	Addition		
NAME			4.2 N/		1			ſ		
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			4.4 01					[
TITLE		DELETE	51 TIT				Change	Addition		
NAME			5.2 NA		Ì	_				
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			5.4 CI1		1					
TITLE		DELETE	6.1 TeT				Change	Addition		
NAME			6.2 NA			L	, comigo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
STREET ADDRESS					address [ł		
1					į					
CITY-ST-ZIP	artify that the information supplied	with this films dose not qualify	for the eve			in Section 119.07(3)(i), Florida Statutes, I further certifi	v that th	a information		
	wrete process incommonly authorities	reno : para minira divos noi dilatiny		THAT	ion stated	en occuon e acortona, enonua olatulas, enutral delle	• 11 ICTS 11	na namana katikata 1		

14. Thereby certify that the information supplied with his stated in Section 119.07(3)(f), Florida Statutes, I further certify that the information indicated on this annual report or suppliemental armbust report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

SIGNATURE: X Ou tunk