


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

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AND
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pg. 1 of 2

97 SEP -5 AM 8:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000063456
1. Corporation Name

AMERICAN DIVERSIFIED SERVICES CORPORATION

Principal Place of Business	Mailing Address
7600 Southland Boulevard Suite 100-466 Orlando, Florida 32809	Hazem Sabry c/o Dietz & Sanders, P.A. 25 South Magnolia Avenue Orlando, Florida 32801

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 Same as above	26 Same as above	July 29, 1996	None
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22 City & State	27 City & State	58-2277300	Not Applicable
23 Zip	28 Zip	5. Certificate of Status Desired	\$8.75 Additional Fee Required
24 Country	29 Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent

William James Dietz
Dietz & Sanders, P.A.
25 South Magnolia Avenue
Orlando, Florida 32801

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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. I am familiar with and accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE *William James Dietz*
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 9/2/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	400002289644-9
CITY-ST-ZIP		1.4 CITY-ST-ZIP	-09/10/97--01091--015
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	****165.00 ****165.00
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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, on an attachment with an address.

SIGNATURE: *Smy*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/30/97

Date

Daytime Phone #

CR2E034 (9/96)

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Law Offices of
DIETZ & SANDERS, P.A.
25 South Magnolia Avenue, Orlando, Florida 32801

Telephone (407) 648-1430

Facsimile (407) 648-9193

William James Dietz

September 2, 1997

**Annual Reports Filing
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314**

**Re: American Diversified Service Corporation
Profit Corporation Annual Report
File Number: American Diversified Service Corp:WJD:102996**

Dear Sir or Madam,

Enclosed please find the Profit Corporation Annual Report for American Diversified Services Corporation and a check in the amount of \$165.00. Pursuant to my conversation with Jackie Tilley of the Florida Division of Corporations, the late fee will be waived because my client never received the first Annual Report form. Please call if you have any questions. Thank you for your assistance in this matter.

Sincerely,



**William James Dietz
for the Firm**

WJD:ks

enclosures