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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Wortham

Secretary of State
DIVISION OF CORPORATIONS

1997 POCCUMENT # POCCOCOCOCOCO

FILED May 07 1997 8:00am Secretary of State

DOCUMENT # P9600068023 (6) ADS INTERNATIONAL CORPORATION							
					3. Date Incorporated or Qualified 08/13/1996	3a. Date of Last Report	
2. Principal P 21	lace of Business	2a. Mailing Address 26			4. FEI Number Applied for	Applied For Not Applicable	
Suite, Apt	#, elc	Suite. Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat 23	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Count	ry	This corporation has liability for Florida Statutes	ntangible tax under s. 199.032, Yes	
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
GAL	vez, jorge		6	1 Name			
,15350 SW 47TH ST MIAMI FL 33185			6	2 Street	Address (P.O. Box Number is Not Acceptate	ole)	
*****			6	3	· · · · · · · · · · · · · · · · · · ·		
L				4 City		FL 85 Zip Code	
	to the provisions of Sections 607.050 registered agent, or both, in the State m familiar with, and accept the oblig	02 and 607,1508, Florida Stati e of Florida. Such change was lations of, Section 607,0505, f	utes, the abo s authorized Florida Statu	ve-named by the cor les.	I corporation submits this statement for the p poration's board of directors. I hereby acces	ourpose of changing its registered of the appointment as registered	
SIGNATURE	Stignative typical or printed name of registered ag-	ent and life if applicable (NC	OTE: Registered A	gent signatur	e required when reinstating)	OATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
1171.6	D DEATHER DEATHER	DELETE	1.1 1016		P	Change Addition	
NAME	MORALES, BEATRIZ D		1.2 NAM	E	GALVEZ, TANIA 19390 SW 47 Street MIAMI, FL 33185	J.	
STREET ADDRESS	15350 SW 47TH ST			ET ADDRESS	15390 5W 47 5416E	7	
City ST ZiP	MIAMI FL 33185	Pereze		-ST-ZIP	MINMI, FL 33185	I Alexandria	
TITLE		☐ DELETE	2.1 TITU			Change Addition	
NAME Ctors Lappores			2.2 NAM	100			
STREET ADDRESS				ET ADDRESS	1	<i>3</i>	
CITY+ST-ZIP TITLE		DELETE	3.1 TITU	'-ST _{T-} ZIP		Change Addition	
NAME			3.2 NAM			• • —	
STREET ADDRESS				et address			
CITY - ST - ZIP			1	-ST-ZIP			
TITLE		DELETE	4 1 TITLI			Change Addition	
NAME			4. 2 NAN	tE .	1		
STREET ADDRESS			4.3 STR	ET ADORESS			
City+St-ZiP			4.4 CITY	-\$T-ZIP			
THTLE		☐ DELETE	5.1 TITL			Change Addition	
NAMÉ			5.2 NAM		20000217 -05/13/970100	<u>'</u> 58 <u>6</u> 2	
STREET ADORESS			5.3 STRE	ET ADDRESS	-05/13/97010	13028	
CITY - S1 - ZIF				-ST-ZIP	***165.00		
THLE		☐ DELETE	6.1 TITU			Change Addition	
NAME			6.2 NAM		:	A G	
STREET ADDRESS				ET ADDRESS		05 517/97	
CHTV+ST-ZP			■ 64 C(TY	-S1-ZIP	1	• . • . • .	

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, or on an attachment with an address.

SIGNATURE



04.14.47

