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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000078095 (2)

ADAMA HOLDINGS, CORP.

Principal Place of Business Mailing Address

May 07 1997 8:00am Secretary of State

FILED



13911 8W 75 STREET MIAMI FL 33183		13911 SW 75 STREET MIAM! FL 33183-3011					
					3. Date Incorporated or Qualified 09/19/1996	3s. Date of Last	Report
· ·	Place of Business	28. Mailing Address	28. Mailing Address		4. FEI Number	Δ	pplied For
21		26			65-0697962		
Sulte, Apt. #, etc.		Suite, Apt. #, etc	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country Zip Co 25 29 30			Florida Statutes			
	9, Name and Address	of Current Registered Agent			10. Name and Address of New Re	gistered Agent	
	ASTILLO B., ALVARO		8	1 Name			
1390 BRICKELL AVENUE SUITE 200			8:	82 Street Address (P.O. Box Number is Not Acceptable)			
	AMI FL 33131		8:	3			
			84	City		FL 85 Zip	Code
office of	r registered agent, or both, i	ns 607 0502 and 607 1508, Florida Stati in the State of Florida. Such change was of the obligations of, Section 607 0505, F	s authorized t	ov the corpor	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of changing of the appointment a	its registered s registered
SIGNATURE	,	or the congations of, section 607,0005, r	FIORICIA STATUT	o.			
	Signature, typed or purited name of			gent signature req	jured when reinstating)	DATE	
12.		FICERS AND DIRECTORS	18.		ADDITIONS/CHANGES TO OFFIC	_	
TITLE NAME	DIAZ, JOSE E	☐ DELETE	1.1 TITLE 1.2 NAME			L Change	Addinon
STREET ADDRESS		- T		T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33183		1.4 Cilly				
TITLE	DELETE DELETE		2.1 TILLE	VI E11		Change	Addition
NAME			2.2 NAME				
STREET ADDRESS	s		2.3 STREE	1 ADDRESS			
CITY-ST-ZIP			2 4 CHY	- S1 · ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAM5	:		÷	
STREET ADDRESS	S		3 3 STREE	ET ADDRESS			
CITY-ST-ZIP			3 4. CITY	- SI - ZIP			
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NAME			4 2 NAM				
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CITY-ST-ZIP TITLE		☐ DELETE	4.4 CiTY- 5.1 TiTLE			Change	Addition
		Dritte	5.2 NAME			onlings	Addition
NAME STREET ADDRESS				EL ADDRESS			
=	9						
CITY-ST-ZIP		DELETE	5.4 CITY - 6.1 TITLE			Change	☐ Addition
NAME		Land Section	62 NAM6	1			
STREET ADDRESS				ET ADDRESS			
			64 CITY	Į.			
CITY-ST-ZIP	aby certify that the informal	ion empolind with this filing does not aus			ed in Section 119 07(3)(i). Etorida Statute	s. I further certify tha	d the

14. To hereby certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(1). Forda Statutes. Former 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 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 without address.

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4/20/97

387-2209