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 # P96000083091 (4)

FILED Apr 21 1998 8:00am Secretary of State

ADAG,	INC.					
Principal Plac	e of Business	Mailing Address	·			EDEGO IIIIL ORIID IDEGO IIRI EDEI
1173 OLD DIXIE HIGHWAY STE B		POST OFFICE BOX 122 LAKE PARK FL 33403-2				
US		US		DO NOT WRITE IN TH	IS SPACE	
1					 Date Incorporated or Qualified 10/04/1996 	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0717867	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required
City & State	c	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	l Registered Agent			10. Name and Address of New Registers	ed Agent
	ILL, JOSEPH K JR		8	1 Name		
500 AUSTRALIAN AVE S				2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	ITE 60 0		_			
WE	EST PALM BEACH FL 33401		8	3		
			Ē	4 City		85 Zip Code
					F	
agent I a SIGNATURE	Signature, typical or printed name of registered ago	nt and tillent approvation (NC	Hi Hogisterod A		orporation submits this statement for the purpose ation's board of directors. I hereby accept the a purpose the directors of the purpose of t	
12.	OFFICERS AND	the second control of	13.		ADDITIONS/CHANGES TO OFFICERS A	
THILE	PTD WILLIAM D	[] DITEIE	1.1 TOLE			Change Addition
NAME	KING, WILLIAM R 81 IRONWOOD WAY NORTH		1.2 NAM	Ì		
STREET ADDRESS	PALM BEACH GARDENS FL		1	ET ADDRESS		į
CITY-ST-ZIP	VS VS	DELETE	1.4 CITY			Change Addition
TITLE	KING, MARY E		2.1 7/11.6			CT Cuande TT Addition
NAME	81 IRONWOOD WAY NORTH		2.2 NAM			
STREET ADDRESS	PALM BEACH GARDENS FL			FLADDRESS		
CITY-ST-ZIP TITLE	TALM DENOTE OFFICE TE	DOTIETE	2.4 CITY 3.1 TITLE			Change Addition
NAME		beat with the	3 2 NAM		•	المارين ما مارين في
STREET ADDRESS			•	ET ADDRESS		
CITY-ST-ZIP			3.4. C(1)			
TITLE		DELETE	4.1 1111.6			Change Addition
NAME			4. 2 NAM	1		
STREET ADDRESS				ET ADDRESS]
CITY-ST-ZIP			4.4 City			
TITLE		DELETE	5.1 TIFLE		;	Change Addition
NAME			5.2 NAM	i		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 C(1)	- S1- ZIP		
THILE		☐ DELETE	6.1 1114.8			Change Addition
NAME			6.2 NAMI			
STREET ADDRESS			63 STRE	ET ADDRESS		
CITY-ST-ZIP			64 CHY	SI-ZIP		

14. Thereby 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 suppliemental 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 coords or trustee employeered 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 attribution with an address.

EIGNATURE: Dan Merry 25 10/00 Recycle Nice ALL HAGE 57-1-813-475