

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

FILED
May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000097437
1. Corporation Name ADAMCO INC.

Principal Place of Business: 100 East Linton Blvd #119B
Delray Beach
Florida 33483
Mailing Address: 100 EAST LINTON BLVD
SUITE # 119B
DELRAY BEACH FL 33483

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21	26	NOV. 14. 97	05-0796154	Not Applicable
22	27	5. Certificate of Status Desired	8.75 Additional Fee Required	
23	28	6. Election Campaign Financing	5.00 May Be Added to Fees	
24	29	7. This corporation owes or has paid the current year intangible	Personal Property Tax due June 30. Yes No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Amal Bahloul 100 East Linton Blvd #119B Delray Beach FL 33483	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 607.0505, Florida Statutes.

SIGNATURE: *Amal Bahloul* Amal Bahloul

4/27/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DELE	1.1 TITLE	Change Addition
NAME	Amal Bahloul	1.2 NAME	
STREET ADDRESS	100 EAST LINTON BLVD. #119B	1.3 STREET ADDRESS	
CITY-ST-ZIP	Delray Beach, Florida 33483	1.4 CITY-ST-ZIP	
TITLE	DELE	2.1 TITLE	Change Addition
NAME	Barbi Jalane	2.2 NAME	
STREET ADDRESS	100 East Linton Blvd # 119B	2.3 STREET ADDRESS	
CITY-ST-ZIP	Delray Beach, FL 33483	2.4 CITY-ST-ZIP	
TITLE	DELE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DELE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: *Amal Bahloul* Amal Bahloul

March 20/98 (56) 279-2466

CR2E034 (10/97)