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 # 1, Corporation Name P97000105061 (0)

AD VENTURES (DIGITAL) IMAGING, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address		- I ABBINDER UND LENEN LODEN BODIN ODNIN BEIDN DIEN BEINE BINEN HIGH IDEN
8001 FAIRVIEW DRIVE #204		8001 FAIRVIEW DRIVE #204		
TAMARAC FL 33321		TAMARAC FL 33321		DO NOT WESTER IN THIS COACE
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				11/24/1997
2. Principal P	lace of Business	2a. Mailing Address		4 CEI Number
21		26 PO BOX 770636		(05 - 08 03 2 6 8 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5,00 May Be
23		28 CORAL SPRIM		Trust Fund Contribution Added to Fees
Zip	Country	29 33077 a	Country USA	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curren		0 7 0 0 7 7	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
ON EXIDITE ON				
	MARAC FL 33321		82 Street Add	dress (P.O. Box Number is Not Acceptable)
10	MANAO EL 000ET		83	
			84 City	85 Zip Code
24 5	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -			FL s 25 000
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 account the oblinations of, Section 607.0505, Florida Statutes.				
SIGNATURE Signature, typed or profited insine of registered-front and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PRESIDENT	DELETE		VICE PRESIDENT L'Change Middition
NAME	PROSIDED LONES	_	12 NAME of	CUE M IONES
STREET ADDRESS	ROBERT JOINES DO 4	170V	1.3 STREET ADDRESS	BOOI FAIRVIEW DR # 204
CITY-ST-ZIP	ROBERT JONES 8001 FAIRVIEW DR # TAMARAC, FL 33	321	1.4 CITY-SI-ZIP	TAMADAC FL 33321
TITLE		☐ DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	L] Change L] Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		Treiete	4.4 CiTY-ST-ZIP	T Change T Addition
TITLE		☐ DELETE	51 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS	. 3		5.9 STREET ADDRESS	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE			61 TITLE	
NAME PERFECT ADDRESS			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