

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90030 034 ***150.00

DOCUMENT # P98000022259

1. Entity Name
ADB DEVELOPMENT INC.

Principal Place of Business	Mailing Address
13 ROYAL PALM WAY SUITE 206 BOCA RATON FL 33432	13 ROYAL PALM WAY SUITE 206 BOCA RATON FL 33432

2. Principal Place of Business 13 Royal Palm Way Suite, Apt. #, etc Unit 206 City & State Boca Raton FL Zip 33432 Country Palm	3. Mailing Address 13 Royal Palm Way Suite, Apt. #, etc Unit 206 City & State Boca Raton Zip 33432 Country Palm
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DO NOT WRITE IN THIS SPACE

4. FEI Number	65-0822214	Applied For
		Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BONANNO, ANTHONY
13 ROYAL PALM WAY
SUITE 206
BOCA RATON FL 33432

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Anthony Bonanno*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 15 - 2001

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anthony Bonanno* *Anthony Bonanno* *Jan 15 - 2001* *561-784-52*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #

CR2E034 (10/00)