

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000096560**

1. Entity Name

ADS BUSINESS GROUP, INC. ✓

FILED
Mar 30, 2000 8:00 am
Secretary of State

03-30-2000 90018 015 ***150.00

Principal Place of Business

~~2894 SW 12 STREET~~
~~DEERFIELD BEACH~~
~~FL 33442~~

Mailing Address

~~2894 SW 12 STREET~~
~~DEERFIELD BEACH, FL~~
~~33442~~

828936

2. Principal Place of Business

1922 E. DISCOVERY CIRCLE
Suite, Apt. #, etc.

3. Mailing Address

1922 E. DISCOVERY CIRCLE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

DEERFIELD BEACH, FL
Zip **33442** Country **USA**

City & State

DEERFIELD BEACH, FL
Zip **33442** Country **USA**

4. FEI Number

65-0875794

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHOOLEY, ADAM
~~2894 SW 12 STREET~~
~~DEERFIELD BEACH, FL 33442~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1922 E. DISCOVERY CIRCLE

DEERFIELD BEACH

FL

Zip Code **33442**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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

TITLE **D** ☐ Delete
NAME **SCHOOLEY, ADAM**
STREET ADDRESS ~~2894 SW 12 STREET~~
CITY-ST-ZIP **DEERFIELD BEACH, FL 33442**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1922 E. DISCOVERY CIRCLE**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33442**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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:

Adam Schooley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/21/00

Daytime Phone #

CR2E034 (9/99)