

DOCUMENT # P99000010381

1. Entity Name

ADAMO CORP.

Principal Place of Business

1421 COURT STREET #B  
CLEARWATER FL 33756

Mailing Address

1421 COURT STREET #B  
CLEARWATER FL 33756-6172

2. Principal Place of Business

2513 N. Gulf Blvd

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 248

Suite, Apt. #, etc.

City &amp; State

Indian Rocks Beach, FL

City &amp; State

Indian Rocks Beach, FL

Zip

33785

Country

Pinellas

Zip

33785

Country

Pinellas

4. FEI Number

59-356-0627

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HERSEM, THOMAS G  
1421 COURT STREET #B  
CLEARWATER FL 33756

7. Name and Address of New Registered Agent

Name

Anita R. GREENBERG

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

2513 N. Gulf Blvd.

Indian Rocks Beach, FL

City

FL

Zip Code

33785

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 Anita R. GREENBERG, STD

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

(NOTE: Registered Agent signature required when reinstating)

Anita R. Greenberg

4/1/2000

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 State10. Election Campaign Financing  
Trust Fund Contribution.☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME GREENBERG, BERNARD Z  
STREET ADDRESS 2513 GULF BOULEVARD  
CITY-ST-ZIP INDIAN ROCKS BEACH FL 33785-0248☐ DeleteTITLE STD  
NAME GREENBERG, ANITA R  
STREET ADDRESS 2513 GULF BOULEVARD  
CITY-ST-ZIP INDIAN ROCKS BEACH FL 33785-0248☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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:

Anita R. Greenberg, Secy. Div.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/2000

Date

727-595-3480

Daytime Phone #

CR2E034 (9/99)