CR2E034 (9/01)

DOCUMENT # P99000020676	2002 UNIFO	RM BUSINESS	REPORT	(UBR
. Entity Name	DOCUMENT # . Entity Name	P99000020676		

1. Entity Na	me F 9 9 0 0 0 0 2	0070			,	,			
ADY & ASSOCIATES, INC.					Prime 4 a	From the con-			
		FILED							
Principal Place of Business Mailing Address					O2 INNOT OUT A				
	556 OAK PARK CIRCL								
DA	VIE, FL 33328	DAVIE, F	FL 333	28	SECRETAR	Y OF STAT	Ε		
				"			PAH IIII		
Principal Place of Business						BANK BANK BOKA TIKA	1 THE CONT		
Suite, Apt	#, etc. ,	Suite, Apt. #. etc.			DO NOT WE	RITE IN THIS S	2s. /	/<	
City & Sta	to	City & State				- U/L	<u> </u>		
City & Sta	NG .	City & State			4. FEI Number 65–0907156			oplied For ot Applicable	
Žip	Country	Zip	Country		5. Certificate of Status Desired		3.75 Add		
	6. Name and Address of Current F	l Registered Agent			7. Name and Address of New				
	ZILA, CONSTANTIN	and the second second	Na	ame		-			
	56 OAK PARK CIRCLE VIE, FL 33328	Ξ	St	reet Address (F	.O. Box Number is Not Acceptat	ole)			
DA	VIE, FE 33320						-		
			Ci	lv		FL	Zip Code	e	
8. The above	named entity submits this statement for	the ourpose of changing it	ts registered of	fice or registere	ed agent, or hoth, in the State of F				
SIGNATURE	Signalure, typed or printed name of requstered agent an	Ort) skilanden ti stat ba	TE Begistered Agen	nt signature reguired v	when reinstating)	DATE			
	oration is eligible to satisfy its Intangible		/!!! FEE IS \$		10. Election Campaign F	inancino	фE О	O	
	requirement and elects to do so. ria on back)	After May 1, 20 Make Check Paya			Trust Fund Contributi	~ —	Added	0 May Be Ito Fees	
11.	OFFICERS AND D		12.		ADDITIONS/CHANGES TO OF	FICERS AND DI	RECTORS	3 IN 11	
TITLE .	PS CONCEANES	☐ Delete	HID.				Change	Addition	
NAME STREET ADDRESS	BUZILA, CONSTANTI 2656 OAK PARK CIR		NAME SIRFELADO	DRESS	00000049615107				
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STREET ADDRESS SITY-ST-ZIP			SERLET ADDE CITY-ST-ZIP						
			#	<u> </u>					

13. Thereby certify that the information supplied with this filling 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 explowered 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ZelZ

ADY & ASSOCIATES, INC. 2656 OAK PARK CIRCLE DAVIE, FL 33328 (954) 648-1636

January 17, 2002

Florida Dept of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Ady & Associates, Inc Document #P99000020676

To Whom It May Concern:

Please be advised that I never received paperwork regarding the yearly Corporate Fees for my company.

I notified the agency of my change of address at the end of 1999 and still did not receive any letters or reports from your office.

I am hereby sending payment for 2000, 2001, and 2002 in order to bring my company current with the state.

I thank you in advance for your time and consideration in this matter, and I apologize for any inconvenience this has caused.

Yours truly,

Constantin Buzila

President, Ady & Associates, Inc.