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FILED	
eb 27, 2002 8:00 a	am
Secretary of State	e

2002	UNIFORM	<b>BUSINESS</b>	REPORT	/HRR
2002	OHITORN	DO3INE33	REPURI	IODU

DOCUMENT # P9900071704  1. Entity Name  ADIDAK, INC.					Secretary of State 02-27-2002 90090 023 ***150.00		
Principal Plac	e of Business	Mailing Address	<del></del>				
	HARBOR DRIVE ALE FL 33312	2530 WHALE HARBOR DRIVE FT LAUDERDALE FL 33312					
·	NO. 12 30012	TI ENODERIDALE TE MOTE	•		1 1891/100 410 1000 4014 8051/1001/1001/1001	niti allamı bibin iğiği	ABIIL RIGI IAA
2. Principal F	Place of Business	3. Mailing Address		·			
		·	<u> </u>	·	Light of Landson Market Miles of State		* *
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN TH	S SPACE	
City & Stat	e	City & State	· · · · · · · · · · · · · · · · · · ·	4.	FEI Number	<u> </u>	plied For
Zip	Country	Zip	Country		65-0278071	\$8.75 Add	ot Applicable
	333111,		Country	5. (	Certificate of Status Desired	Fee Require	
	6. Name and Address of Current	Registered Agent		7. 1	Name and Address of New Registere	d Agent	
LECHNE	R CADI		Name	· <u>-</u>			
	ALE HARBOR DRIVE		Street A	ddress (P.O. E	Box Number is Not Acceptable)		
	ERDALE FL 33312				<u></u>		
			City			Zip Cod	e
8 The above	named entity submits this statement for	r the purpose of changing its re	adistered office or	registered an			
<b>U</b>	· ·	the purpose of ununging to the	giotorea emea en	rogiotorea ag	one, or boss, we are occasion frontage.		
SIGNATURE .							
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signati	are required when re	einstating) DATI		
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, 2002 Fee will be \$550.00 Make Check Payable to Department of St		50.00	10. Election Campaign Financing Trust Fund Contribution.		<b>0</b> May Be I to Fees
11.	OFFICERS AND		12.	AD	DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	\$ IN 11
TITLE NAME	PVD	☐ Delete	title Name			☐ Change	Addition
STREET ADDRESS	LECHNER, CARL 2530 WHALE HARBOR DRIVE		STREET ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL 33312		CITY-ST-ZIP				
TITLE	Ti.	☐ Delete	TITLE			() Change	☐ Addition
NAME STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		☐ Delete 🎉				☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRESS**		المواردة والمراجع والأسعي ووقستون الميسيدي المعيد		,
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE			TITLE	·		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 flustee 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 attachmen with an address, with all other like empowered.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

**SIGNATURE** 

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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☐ Delete

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954587 2306

☐ Change

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Addition

☐ Addition

CR2E034 (9/01)