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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$21471

(5)

ADRIAN DESIGNS OF POMPANO, INC.

Principal Place of Business Mailing Address

1395 NW 17TH AVE. STE. 111

DELRAY BEACH FL 33445

Mailing Address

1395 NW 17TH AVE. STE. 111

DELRAY BEACH FL 33445-2553

FILED
Apr 28 1997 8:00am
Secretary of State



Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. 5, Certificate of Status Desired Fee Required Fee Required City & State City & State 6, Flection Campaign Financing \$5.00 May Be	1395 NW 17TH AVE. STE. 111 DELRAY BEACH FL 33445			1395 NW 17TH AVE. 8TE. 111 DELRAY BEACH FL 33445-2553				
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Name and Address of Current Registered Agent		Country		Count	ry			
HOROWITZ, PAUL 821 SPANISH CIRC 432E DELRAY BCH FL 33445 82 Street Address (P.O. Box Number is Not Acceptable) 83 Zip Code 64 City FL 85 Zip Code 65 Zip Code 67 City FL 85 Zip Code 67 City FL 85 Zip Code 68 Zip Code 67 City FL 85 Zip Code 68 Zip Code 68 Zip Code 68 Zip Code 69 Zip Code 69 Zip Code 69 Zip Code 69 Zip Code 60 Z		25	20	30				
HOROWITZ, PAUL 921 SPANISH CIR 432E DELRAY BCH FL 33445 82 Street Address (P.O. Box Number is Not Acceptable) 83				1001			gistered Agent	
## 2 SPANISH CR 432E DELRAY BOH FL 33445 ## 2 City	шп			8	1 Name	•		
BELIAY BCH FL 33445 BB City FL B6 Zip Code 11. Fursional to the provisions of Sections 607.0502 and 607.1508, Horida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and infentiar with, and eccept the orthogosomy of Section 607.0506, Horida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and infentiar with, and accept the orthogosomy of Section 607.0506, Floridas Statutes. SIGNATURE T2. OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DELETE 1.11 TILE Change Addition MAIN SIRRET ACRESS 1.25 MIRE ADDRESS DELAY BEACH FL DELETE 1.11 TILE Change Addition NAME 22 NAME 22 NAME 23 STREET ADDRESS DIFF. ST. PP DELETE 31 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRE ADDRESS DIFF. ST. PP DELETE 31 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRE ADDRESS DIFF. ST. PP DELETE 31 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRE ADDRESS DIFF. ST. PP DELETE 31 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRE ADDRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRE ADDRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRE ADDRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRET ACRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRET ACRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRET ACRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRET ACRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRET ACRESS DIFF. ST. PP DELETE 3.11 TILE Change Addition NAME SIRRET ACRESS 3.25 MIRET ACRESS DIFF. ST. PP DELETE 3.25 MIRET								
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The Pressure to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent to mit familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE HOROWITZ, PAUL SIERET ALDRESS CITY-S1-2F DELETE 1.1 THE DELETE 1.1 THE DELETE 1.1 THE 2.2 THE DELETE 1.3 SIERET ALDRESS CITY-S1-2F DELETE 3.1 THE Change Addition Additio				5	"			
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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

HE AND TYPED ON PRINTED NAME OF FIGURE OFFICER OF OFFICER OF THE O

4/22/97

511-274-950)