02-03-1999 90017 012 ***150.00

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Feb 03, 1999 8:00am **Secretary of State**

DOCUMENT # \$98935

PROFIT

CORPORATION.

1999

ANNUAL REPORT

ADSERVE, INC.

Pri	ncipal	Place of Business
	DANIC	II DOAD

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Principal Place of Business	Mailing Address				
771 RANCH ROAD WESTON FL 33326	771 RANCH ROAD WESTON FL 33326		DO NOT WRITE IN THIS SPACE		
			Date Incorporated or Qualifed 12/06/1991		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For		
21	26		65-030 1964 Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip Country 24 25	Zip Co. 29 30	untry	8. This corporation owes the current year Intangible Personal Property Tax.		
9. Name and Address of Current I	Registered Agent	10. Name and Address of New Registered Agent			
HCRM CORP. ADS 1900 CORPORATE BLVD., N.W. 400 - WEST BUILDING BOCA RATON FL 33431		81 Name 82 Street Add	32 Street Address (P.O. Box Number is Not Acceptable)		
The state of the s	The Marketines of their	84 City	FL 85 Zip Code		
44 Pursuant to the provisions of Sections 607 0502 :	Florida: Such change was authorize	d by the corporat	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered		

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

agent. I a	egistered agent, or both, in the State of Florida. Such change was aum familiar with, and accept the obligations of, Section 607.0505, Flori	da Statutes.	Tation's board of directors. Thereby accept the ap	S	
SIGNATURE	Signature, typed or printed name of registered agent end title if applicable. (NOTE:	Registered Agent signature rec	quired when reinstating) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS	S IN 12
TITLE	D DELETE	1.1 TITLE	ro ferri	☐ Change	☐ Addition
NAME	DAVIDOV, MARIE L.	1.2 NAME		*5	
STREET ADDRESS	771 RANCH ROAD	1.3 STREET ADDRESS		r i	
CITY-ST-ZIP	WESTON FL 33326	1.4 CITY-ST-ZIP			
TITLE	VPD □ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	BACCINI, MARIA TERESA	2.2 NAME			
STREET ADDRESS	2030 O'HIGGINS	2.3 STREET ADDRESS		-	
CITY-ST-ZIP	BUENOS AIRES CP 1425	2.4 CITY-ST-ZIP	·		
TITLE	SE DONO	3.1 TITLE		Change	☐ Addition
NAME DISTRIB	fij krajiji. Pot Afrikanovam na feta - az ist	3.2 NAME			
STREET ADDRESS	FECTIFORATE BLVD., N.W.	3.3 STREET ADDRESS	(2) 人工供給水槽付款分配的	ien austrian dun ein	S1 2 (20) (23)
CITY-ST-ZIP	WEST BUILDING	3.4. CITY-ST-ZIP	· 大學學 · · · · · · · · · · · · · · · · ·		
TITLE 3500	## DELETE	4,1 TITLE	- () 人名西拉格格德 网络斯特	Change 5	Addition
NAME FALL OF D	1970 - Principal Communication (Communication Communication Communicatio	4. 2 NAME		• •	ê
STREET ADDRESS		4.3 STREET ADDRESS	•	•	•
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	. DELETE	5.1 TITLE		☐ Change	Addition
NAME	• .	5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP:	0	5.4 CITY-ST-ZIP			
TITLE - Rec	□ DELETÉ	6.1 TITLE		☐ Change	☐ Addition
NAME 3		6.2 NAME			
STREET ADDRESS	A MARIE AND AN SERVICE	6.3 STREET ADDRESS	. ,	•	
CITY ST 7ID		6.4 CITY-ST-ZIP			

14. 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 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, with all other like empowered.