

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

FILED

May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V42242** (0)
1. Corporation Name
ADIS INCORPORATED



Principal Place of Business 9800 S.W. 20TH STREET MIAMI FL 33165 US	Mailing Address 9800 S.W. 20TH STREET STE 235 MIAMI FL 33165 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2141 S.W. 98 PL Suite, Apt. #, etc.		2a. Mailing Address 26 2141 S.W. 98 PL Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/09/1992	
22 City & State 23 MIAMI, FL.		27 City & State 28 MIAMI, FL.		4. FEI Number 65-0350287 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
24 Zip 33165		29 Zip 33165		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country DADE		30 Country DADE		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent DIAZ, ALBERTO 9800 S.W. 20TH STREET MIAMI FL 33165				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2141 SW 98 PL 83 City 84 City Miami FL 85 Zip 33165	
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11. Pursuant 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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DIAZ, ALBERTO 9800 S.W. 20TH STREET MIAMI FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD DIAZ, ALBERTO 2141 S.W. 98 PL MIAMI, FL. 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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 in an attachment with an address.

SIGNATURE:  4/15/98

CR2E034 (10/97)