

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91752 025 ***158.75

DOCUMENT # **PO1000066621** CORP #

1. Entity Name
ADVANCED ASSET RECOVERY CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1560-56th SQ. W
Suite, Apt. #, etc.

3. Mailing Address
1560-56th SQ W
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Vero Beach - FL **Vero Beach, FL**

4. FEI Number
59-3729499
Applied For
Not Applicable

Zip
32966 Country
INDIAN RIVER

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____
Signature: Typed or printed name of registered agent and date of application. (NOTE: Registered Agent Signature required when reappointing) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY, ST, ZIP	P RAYMOND E. GENT 1560-56th SQ. W. VERO BEACH, FL 32966
TITLE NAME STREET ADDRESS CITY, ST, ZIP	ST MELVINA GENT 1560-56th SQ. W. VERO BEACH, FL 32966
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IN THIS SPACE**

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, or on all other like employment record.

SIGNATURE: **Raymond E. Gent**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 **561-567-9647**
Date Daytime Phone #

CR2E034B (12/01)

Attachment
Doc # P01000066621

4/23/02 CORPORATE DETAIL RECORD SCREEN 3:42 PM
NUM: P01000066621 ST:FL ACTIVE/FL PROFIT FLD: 07/06/2001
NAME : ADVANCED ASSET RECOVERY CORPORATION
PRINCIPAL: 1560-56TH SQUARE WEST
ADDRESS VERO BEACH, FL 32966
RA NAME : GENT, RAYMOND E
RA ADDR : 1560-56TH SQUARE WEST
VERO BEACH, FL 32966
ANN REP : * NONE FILED *

4/23/02 OFFICER/DIRECTOR DETAIL SCREEN 3:42 PM
CORP NUMBER: P01000066621 CORP NAME: ADVANCED ASSET RECOVERY CORPORATION
TITLE: D NAME: GENT, RAYMOND E
1560-56TH SQUARE WEST
VERO BEACH, FL 32966
TITLE: D NAME: GENT, MELVINA
1560-56TH SQUARE WEST
VERO BEACH, FL 32966

----- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT -----