

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092532 (7)
1. Corporation Name

ADVANCED SYSTEM SOLUTIONS INC.



Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
600 N.E. 36TH STREET SUITE 1015 MIAMI FL 33137		600 N.E. 36TH STREET SUITE 1015 MIAMI FL 33137		12/06/1995	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For / Not Applicable		
21	26	65-0674145			
Suite, Apt. #, etc	Suite, Apt. #, etc	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22	27	<input type="checkbox"/>			
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23	28	<input type="checkbox"/>			
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	25	29	30		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
JIMENEZ, CARLOS E 600 N.E. 36TH STREET SUITE 1015 MIAMI FL 33137		81. Name			
		82. Street Address (P.O. Box Number is Not Acceptable)			
		83.			
		84. City	FL	85. Zip Code	

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: *[Signature]* President *[Signature]* Director DATE: 08/02/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D JIMENEZ, CARLOS E	1.2 NAME	P/S ARDILA, JORGE A
STREET ADDRESS	600 N.E. 36TH ST. #1015	1.3 STREET ADDRESS	15444 SW 115th Street
CITY-ST-ZIP	MIAMI FL 33137	1.4 CITY-ST-ZIP	Miami, FL 33196
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Tr Jimenez, Janeth
STREET ADDRESS		2.3 STREET ADDRESS	600 N.E. 36th Street
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami, FL 33137
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	T Jimenez, Carlos E
STREET ADDRESS		3.3 STREET ADDRESS	600 N.E. 36th Street
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Miami, FL 33137
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	700001918747
STREET ADDRESS		6.3 STREET ADDRESS	-08/12/96--01019--005
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* Director *[Signature]* President DATE: 8/2/96 Digital Filing # (705) 576-5831

CR2E034 (3/96)