2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000004883

FILED Feb 21, 2008 Secretary of State

Entity Name: ADVANTAGE CREDIT INTERNATIONAL INCORPORATED

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
15 W STR BUITE 20 <i>A</i> PENSACC		US		
Current M	ailing Addres	s:	New Mailing Address	s:
15 W STR SUITE 20/	4			
PENSACC	DLA, FL 32501	US		
El Number	: 59-3363831	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:
1121 N 9T	KARL W JR H AVE DLA, FL 32507	US	BOYLES, KARL W JR 212 WEST CERVAN PENSACOLA, FL 325	TES STREET
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	·		,	d office or registered agent, or both,
n the State	named entity s e of Florida.		,	
n the State	named entity s e of Florida. RE:		ourpose of changing its registered	d office or registered agent, or both,
n the State	named entity s e of Florida. RE: Electroni	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
n the State SIGNATUI	named entity s e of Florida. RE: Electroni	ubmits this statement for the position of the position of Registered Agranust Fund Contribution ().	ourpose of changing its registered	d office or registered agent, or both,
n the State BIGNATUI Election Car DFFICER: itle: lame: kddress:	named entity set of Florida. RE: Electronic impaign Financing	ubmits this statement for the particle of Registered Agranust Fund Contribution (). FORS: Delete ST SUITE 20A	ourpose of changing its registered	d office or registered agent, or both, 02/21/2008 Date
n the State	named entity see of Florida. RE: Electronic mpaign Financing S AND DIRECT DCEO () HANDLEY, TIM 15 W STRONG PENSACOLA, FI	ubmits this statement for the particle of Registered Agranus Fund Contribution (). FORS: Delete ST SUITE 20A L 32501 Delete ST SUITE 20A	ent ADDITIONS/CHANGI Title: Name: Address:	d office or registered agent, or both, 02/21/2008 Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE BRUNER S 02/21/2008