2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 16, 2003 8:00 am Secretary of State 05-16-2003 90180 042 ***150.00

DOCUMENT # P02000078004 1. Entity Name ADVANCE NETWORK ADVISOR, INC.												
Principal Place 15400 SW 13 #412 MIANI, FL 33	34 PL.	15400 5 #412	Mailing Address 15400 SW 134 PL. #412 MIANI, FL 33177						•			
2. Principal F	Place of Busin	3. Mailin	3. Mailing Address									
Suite, Apt.	. #, etc.		Suite,	Suite, Apt. #, etc.			{	CHECK HERE IF MAI	ang Ch	ANGES		•
City & State			City &	C.ty & State			4. FEI Number Applied Fo 42 - 154 3577 Not Applied Fo				plied For it Applicable]
Zip	Zip Country		Zip	Zip Cour		itry 5		5. Certificate of Status Desired			Additional uired	
6. Name and Address of Current Registered Agen						Name	7. N	Name and Address of New Registe	red Agen	it		1
DIAZ, JOSE A 15400 SW 134 PL.						Street Address (P.O. Box Number is Not Acceptable)						
#412 MIAMI, FL				Stiedt Vaglesa /	r.U. b	sox number is Not Acceptable)				1		
THAM, FL.	33177					City			FL	Zip Code		-
8. The above	named entity	y submits this st ered agent.	atement for the purpos	e of changing	its register	ed office of register	ed ag	ent, or both, in the State of Florida.	am famili	ar with,	and accept	1
SIGNATURE												
SIGNATURE.	Signature, typed	or printed name of each	rsteed agent and tide if applica Control control of the control of	ėle. (N	OTE: Registere	d Agent signature required	iwihan ra	sinstating) D	ATE			
After	May 1 200	II FEE IS \$15 33 Fee will be Florida Dep	g 00 \$550 00 artment of State					Election Campaign Financing Trust Fund Contribution.	; 		O May Be to Fees	
10.	I _	OFFIC	ERS AND DIRECTORS		11.		AD	DITIONS/CHANGES TO OFFICERS	AND DIR	ECTOR		1_
TITLE NAME	P DIAZ, JOS	EΑ		☐ Delete	TITLE					Change	Addition Addition	10/02
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CiTY-S1-ZP Title	}			Delete	1010	·ST-21P				Change	Addition	$\frac{1}{2}$
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12. 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 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 redevertor fusite employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all address, with all address, with all address.												
SIGNAT	SIGNATURE: Jose A. DIAZ May 13 2003											
		SIGNATURE AND	TYPED OR PRINTED NAME O	SIGNING OFFICE	ER OR DIRECT	OR		` Date	Davisme	Phone #		i .