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Apr 19, 2006 8:00 am
Secretary of State
04-19-2006 90098 039 ***150.00

PLEASE READ ALL INSTRUCTIONS BEFORE COM

CORPORATION
[redacted]
Annual Report

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F04D00003602

1. Corporation Name
ADVANCE WORLD TRADE, INC.

n

60028730

CR2E081 (12/05)

2. Principal Office Address	3. Mailing Office Address
4321 N. KNOX AVE.	4321 N. KNOX AVE.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CHICAGO, IL. 60641	City & State: CHICAGO, IL.
Zip: 60641 Country: USA	Zip: 60641 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 6/22/2004

5. FEI Number: 36-3218349 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: REY JACKSON

Street Address (P.O. Box Number is Not Acceptable): 8984 N.W. 105TH WAY

Suite, Apt. #, Etc.:

City: MEDLEY, FL. 33178 State: FL Zip Code: 33178

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent _____ Date _____
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	MICHAEL GREEN	4321 N. KNOX AVE	CHICAGO, IL. 60641

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: _____ 4/4/06 773-777-7100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #