2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 10, 2008 8:00 am Secretary of State 09-10-2008 90002 012 ***550.00

DOCUMENT # F12000002388 1. Entity Name ADVANCED INTERACTIVE SYSTEMS, INC.						09-10-20	00 90002 012	330.00
Principal Place of Business 12001 SCIENCE DR, SUITE 125 ORLANDO, FL 33324		Mailing Address 665 ANDOVER PARK WEST TUKWILA, WA 98188-3321						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #. etc.		Suite, Apt. #, etc.			09032008	Chg-P	CR2E034 (12/06)	
City & State		City & State			4. FEI Number 91-1732			pplied For ot Applicable
Zip	Country	Zip	Coun	try	5. Certificate o	f Status Desired	S8.75 Ad Fee Require	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
CT. CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)				
1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				City			FL Zip Coo	de
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. I am familiar with, and accident the obligations of registered agent.								, and accept
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OATE								
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008 9. Election Campaign Fi Trust Fund Contribution					.00 May Be ded to Fees			
10.	OFFICERS AND		11.		ADDITIONS/0	HANGES TO OFF	ICERS AND DIRECTOR	
TITLE NAME			TITL:				Change	Addition
STREET ADDRESS				EET ADDRESS				
CITY-ST ZIP			TITL	- ST · ZIP			☐ Change	Addition
NAME	MAY, TIM	_ Delete	NAM				Shange	- Addition
STREET ADDRESS CITY-ST-ZIP	12001 SCIENCE DR STE 125			ET ADDRESS - ST- ZIP				
TITLE	ORLANDO, FL 32826	□ Delete	TITL				☐ Change	☐ Addition
NAME	FOGG, JOSEPH G III		NAM					
STREET ADDRESS CITY-ST-ZIP	1200 SCIENCE DR STE 125 ORLANDO, FL 32826			ET ADDRESS -ST-ZIP				
TITLE	CD	Delete	TITL				☐ Change	Addition
NAME -	RIGAS, JOHN		NAM					
STREET ADDRESS CITY-ST-ZIP	7760 TECHNOLOGY DR MELBOURNE, FL 32984			ET ADDRESS - ST-ZIP				
TITLE	D	☐ Delete	TITL				☐ Change	Addition
NAME STREET ADDRESS	ZILKHA, DONALD E 7760 TECHNOLOGY DR		NAM	EET ADDRESS]
CITY-ST-ZIP	MELBOURNE, FL 32984			-ST-ZIP				
TITLE	D	☐ Delete	TITU				☐ Change	☐ Addition
NAME STREET ADDRESS	KEYS, WILLIAM M 7760 TECHNOLOGY DR		NAM STRI	EET ADDRESS				
· · · · · · · · · · · · · · · · · · ·			- ST-ZIP				l	
12. I hereby cartify that the information supplied with this filling does not qualify for the examplions contained in Chanter 119. Florida Statutas, I further cartify that the information								

Increase desire that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with a figure of the chapter 607.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR