


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2005 08:00 AM
Secretary of State

DOCUMENT # F78744
 1. Entity Name
 ADVANCED MARKETING STRATEGIES, INC.



Principal Place of Business Mailing Address
 1300 FUNSTON STREET 1300 FUNSTON STREET
 HOLLYWOOD, FL 33019 HOLLYWOOD, FL 33019

DO NOT WRITE IN THIS SPACE



07062005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 59-2226356 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CITRON, MERRILL
 1300 FUNSTON STREET
 HOLLYWOOD, FL 33019

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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 accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CITRON, DALIA
STREET ADDRESS	1300 FUNSTON STREET
CITY-ST-ZIP	HOLLYWOOD, FL 00000,
TITLE	PD
NAME	CITRON, MERRILL
STREET ADDRESS	1300 FUNSTON STREET
CITY-ST-ZIP	HOLLYWOOD, FL 00000,
TITLE	S
NAME	CITRON, DAVID
STREET ADDRESS	1300 FUNSTON STREET
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 07/22/05-80005-016 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 an address, with all other like empowered.

SIGNATURE: Merrill Citron 07-15-2005 9549210287
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #