

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004055

FILED
May 19, 2004
Secretary of State

Entity Name: ADVANCED BROADBAND SYSTEM SERVICES, INC.

Current Principal Place of Business:

861 SYMPHONY ISLES BLVD
APOLLO BEACH, FL 33572

New Principal Place of Business:

Current Mailing Address:

11705 BOYETTE ROAD
PMB 502
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 58-2367713 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: BRAKEFIELD, RICHARD M
Address: 319 1ST STREET NE
City-St-Zip: RUSKIN, FL 33570

Title: SD () Delete
Name: KIRKMAN, KENNETH M
Address: 319 1ST STREET NE
City-St-Zip: RUSKIN, FL 33570

Title: T (X) Delete
Name: WILSON, ROBIN C
Address: 319 FIRST STREET N.E.
City-St-Zip: RUSKIN, FL 33570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP (X) Change () Addition
Name: BRAKEFIELD, RICHARD M
Address: 861 SYMPHONY ISLES BLVD
City-St-Zip: APOLLO BEACH, FL 33572

Title: SD (X) Change () Addition
Name: KIRKMAN, KENNETH M
Address: 861 SYMPHONY ISLES BLVD
City-St-Zip: APOLLO BEACH, FL 33572

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RICHARD M. BRAKEFIELD

CDP

05/19/2004

Electronic Signature of Signing Officer or Director

Date