2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # G57582 1. Entity Name ADVANCED NETWORK PRODUCTS, INC.							FILED Feb 17, 2002 8:00 am Secretary of State 02-17-2002 90046 037 ***150.00				
	lace of Business	NWY	3. Mailing Address	Mailing Address							
Suite Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Stat	e · ·	-1	City & State			4.	4. FEI Number Applied For S9-2332790 Not Applicable				
Zip 3316		Ade	Zip	Cour	ntry	5.	Certificate of Stat	tus Desired	\$8.75 Add Fee Require	ditional	
		ddress of Current Re	egistered Agent		Name	7.	Name and Addre	ess of New Register	ed Agent		
DURR, GI	RACE					ddress (P.O	. Box Number is N	ot Acceptable)			
	Dronado dr. FL 33181				20500 W				DPive	£108	
IN DIRATI					A 11	an'	C bujv ney			# 100 80 -[6[]	
SIGNATURE	Signature, typed or printed	name of registered agent and		E: Registere	ed Agent signat	ure required when		ne State of Florida.	<u>1/2002</u>	2	
Tax filing (See criter	pration is eligible to s requirement and electric ria on back)	cts to do so.	FILE NOW! After May 1, 20 Make Check Payat	02 Fee ble to D	will be \$5 Departmen	50.00 t of State	Trust Fur	Campaign Financing Id Contribution.		O May Be to Fees	l
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Durr, grace i 13100 corona North miami f	do dr	IRECTORS		.E	205	108 00 W.	COUNTRY 33180 -	Club	DRive	CR2E034 (9/01)
TITLE NAME STREET ADDRESS CITY - ST - ZIP					LE ME REET ADDRESS Y - ST - ZIP				Addition	g	
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TITLE NAME STREET ADDRESS CITY - ST-ZIP			Delete						Change	Addition	
indicated of the cor changed	l on this report or sup poration or the recei , or on an attachmen	hation supplied with the polemental report is the infer or trustee empower with an address, with the formation of the formation of the formation of the formation of the formation of the formation of the formation of the formation of the formation of the formation of the formation of the formation of the formation of the formati	his filing does not qualify for rue and accurate and that r vered to execute this report th all other like empowered R	r the exerning signal as required to the second sec	emption sta ature shall h vired by Cha ACE	ted in Sectio ave the sam apter 607, Fi	ne legal effect as if orida Statutes; and RR	made under oath; th that my name appe	at I am an onicer ars in Block 11 oi	r Block 12 if	ļ
SIGNAT		ATURE AND TYPED OR PRI	INTED NAME OF SIGNING OFFICER	OR DIREC	TOR			<u>9-02 30</u> Date	Daytime Phone #		