2000 UNIFORM BUSINESS REPORT (UBR) **FILED** May 03, 2000 8:00 am Secretary of State **DOCUMENT # G58134** 1. Entity Name AVANT ADVERTISING, INC. 05-03-2000 90056 010 ***150.00 Principal Place of Business Mailing Address 901 S. FEDERAL HWY ONE E. WACKER DRIVE HOLLYWOOD FL 33009 3200 CHICAGO IL 60601-2002) (1844) 1860 (1864) (1864) (1866) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864 2. Principal Place of Business 3. Mailing Address 285 West Huntington Drive 901 S. Federal Hwy. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2332669 Hallandale, Florida Arcadia, Califòrniá 🔧 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired 33009 USA 91066-6014 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees X (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. XXXXX XXXXXX ☐ Change X Delete TITLE DONN, R. DOUGLAS NAME 901 S. FEDERAL HWY STREET ADDRESS CITY-ST-ZIP HALLANDALE FL 33009 Change ★ Addition X Delete TITLE s/T/D DODEN, TAKESHI NAME MITCHELL, David A. 901 S FEDERAL HWY STREET ADDRESS 285 West Huntington Drive HALLANDALE FL 33009 CITY-ST-ZIP Arcadia, CA 91066-6014 ☐ Change XXXXXXX Delete Coxixxoxixixox GUNDERSON, MARK NAME 901 S. FEDERAL MARK STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS x**xx#**x*k*xxxbxXxx2xxb0 HALLANDALE FL 33009 CITY-ST-ZIP CITY-ST-ZIP HallandalexxXXXXXXXXXXXX ☐ Delete Change X Addition TITLE TITLE P/D NAME NAME CAMPBELL, Jerry D. STREET ADDRESS STREET ADDRESS 1070 East Main Street CITY-ST-ZIP CITY-ST-ZIP <u>Owosso, MT 48867</u> X Addition Change ☐ Delete TITLE TITLE Controller NAME BROMBY, James NAME STREET ADDRESS 285 West Huntington Drive STREET ADDRESS Arcadia, CA 91066-6014 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed; or on an attachment with an address with all other like empowered.

JAMES BROMBY

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April /2, 2000

(954) 457-6203

Daytime Phone #