**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **H05169**

Corporation Name

ADVANCED TELECOMMUNICATIONS SYSTEMS, INC.

Principal Place of Business .	Mailing Address	
1131 N.E. 214TH ST. MIAMI FL 33179-1317	1131 N.E. 214TH ST. MIAMI FL 33179-1317	

## May 03, 1999 8:00 am Secretary of State

05-03-1999 90108 017 \*\*\*150.00



Principal Place	e of Business	M	ailing Address			
1131 N.E. 214TH ST.			11 N.E. 214TH ST.			
MIAMI FL 33179	H317	MIA	AMI FL 33179-1317			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						06/25/1984
- Data - 1 1 D	land Decimal		Mailing Address			4. FEI Number Applied For
	lace of Business	2a.	Mailing Address			59-2413994 Not Applicable
21		26	Outline And M. sto			39-24 13994   Not Applicable   \$8.75 Additional
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required
22		27	011 1 01 1			
City & State	9	Ь	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country		Zip	Count	<u>y</u>	a. This corporation owes the current year, Intangible  Personal Property Tax. Yes
24	25	29]	30	)		Personal Property Tax.
	9. Name and Address of Curren	t Regis	tered Agent	8	1 Name≇	
HIIG	HES, LEONARD G			ľ	' Name	ranjor F. Hyghes
	N.E. 214TH STREET			8	2 Street	Address (P.O. Rox Number is Not Acceptable)
				L	11	31 N.E. 214 ST
NU.	MIAMI BEACH FL 33179			8	3	10/2 1 T.
				-	4 City i	85 Zin Code
				l°	T City Y	Mi Ami FL   33175
11. Pursuant	to the provisions of Sections 607.050	2 and 6	07.1508, Florida Statutes,	the abo	ve-named	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	da. Such chande was auth	orized b	v the corpo	poration's board of directors. I hereby accept the appointment as registered
	. \	1	Chi works			4//29/99
SIGNATURE	Signature, typed or printed pame of registered ager	t and title	if applicable. (NOTE: Re	gistered Ag	ent signature r	required when reinstating) DATE
12.	OFFICERS AN			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Р		☐ DELETE	1.1 TTLE		P Schange Addition
NAME	HUGHES, LEONARD G			1.2 NAMI		Wiresinia E Hunbar
STREET ADDRESS	1131 N.E. 214 STREET			13.STRF	ET ADDRESS	ingliture all ca
	N. MIAMI BEACH FL 33179			1.4 CITY		1131 N.E. 214 ST MIAMI, FL. 33179
CITY+ST-ZIP TITLE	T T		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
	HUGHES, VIRGINIA F			2.2 NAMI		
NAME						Leonard G. Hughes
STREET ADDRESS	1131 NE 214TH STREET				ET ADDRESS	1
CITY-ST-ZIP	MIAMI FL 33179		/ Delete	2. 4 CITY		MIAMI, FL 33179 Schange Addition
MILE		. —	DELETE	3.1 TITLE		- V
NAME				3.2 NAM		Rebecca Hughes
STREET ADDRESS				3.3 STRE	ET ADORESS	
CITY-ST-ZIP				3.4. CITY		MIAMI, FL 33179
TITLE			☐ DELETE	4.1 TITLE		S Addition
NAME				4. 2 NAM	Ε .	DARRY L. E. Hughes
STREET ADDRESS				4.3 STRE	ET ADDRESS	1131 NE 21457
CITY-ST-ZIP				4,4 CITY	ST-ZIP	MIAMI, FL 33179
TITLE			☐ DELETE	5.1 TTL		Change Addition
NAME				5.2 NAM	<b>=</b>	
STREET ADDRESS				5.3 STRE	ET ADORESS	
CITY-ST-ZIP				5.4 CITY	·ST-ZIP	
TITLE			☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAM	<u> </u>	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP