## 2001 UNIFORM BUSINESS REPORT (UBR)-

## FILED Apr 24, 2001 8:00 am Secretary of State **DOCUMENT # H05169** 1. Entity Name ADVANCED TELECOMMUNICATIONS SYSTEMS, INC. 04-24-2001 90254 009 \*\*\*150 00 Principal Place of Business Mailing Address 1131 N.E. 214TH ST. 1131 N.E. 214TH ST. MIAMI FL 33179-1317 MIAMI FL 33179-1317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2413994 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HUGHES, VIRGINIA F Street Address (P.O. Box Number is Not Acceptable) 1131 N.E. 214TH STREET NO. MIAMI BEACH FL 33179 Zip Code City 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) 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME HUGHES, LEONARD G STREET ADDRESS STREET ADDRESS 1131 N.E. 214 STREET CITY-ST-ZIP CITY-ST-7IP N. MIAMI BEACH FL 33179 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME HUGHES, VIRGINIA F STREET ADDRESS STREET ADDRESS 1131 NE 214TH STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33179 - Addition-Detete □ Change TITLE NAME NAME HUGHES, REBECCA STREET ADDRESS STREET ADDRESS 1131 N.E. 214 STREET CITY-ST-ZIP CITY-ST-ZIP N. MIAMI BEACH FL 33179 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME HUGHES, DARRYL E STREET ADDRESS STREET ADDRESS 1131 N.E. 214 STREET CITY-ST-ZIP CITY-ST-ZIP N. MIAMI BEACH FL 33179 ☐ Change ☐ Addition ☐ Delete TITI E TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: \_

NAME

STREET ADDRESS

CITY-ST-ZIP

4-18-01 (305) 690-9655