

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 30 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K23102 (2)

1. Corporation Name

ADVANCED MODULAR SYSTEMS, INC.



Principal Place of Business

Mailing Address

1911 NW 15TH ST  
POMPANO BEACH FL 33069  
US

1911 NW 15TH ST  
POMPANO BEACH FL 33069  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/10/1988

4. FEI Number

59-2887805

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIS, GARY M.  
22328 MARTELLA AVE  
BOCA RATON FL 33433

81 Name Willis Gary M.

82 Street Address (P.O. Box Number is Not Acceptable)  
22383 Martella Ave

83

84 City Boca Raton FL 33433

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered  
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered  
agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/1/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PS  
NAME WILLIS, GARY M.  
STREET ADDRESS 22328 MARTELLA AVE  
CITY-ST-ZIP BOCA RATON FL

TITLE T  
NAME DWORKIN, SIDNEY  
STREET ADDRESS 2800 S. OCEAN BLVD. #12F  
CITY-ST-ZIP BOCA RATON FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11 TITLE  
12 NAME  
13 STREET ADDRESS 22383 Martella Ave  
14 CITY-ST-ZIP Boca Raton FL 33433

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

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 changed, on an attachment with an address.

SIGNATURE

4/1/98

(954) 960-1550

CR2E034 (10/97)