

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # L33738

1. Entity Name
ADVANTAGE INTERNATIONAL, INC.



**FILED
Apr 27, 2005 8:00 am
Secretary of State**

04-27-2005 90293 034 ***158.75

Principal Place of Business
1911-B E FOWLER AVE
TAMPA, FL 33612 US

Mailing Address

1911-B E FOWLER AVE
TAMPA, FL 33612 US

2. Principal Place of Business

4803 George Rd
Suite 400

3. Mailing Address

4803 George Rd

Suite 400

City & State
Tampa FL

Zip 33634 Country USA

City & State
Tampa FL

Zip 33634 Country USA

04252005 Chg-P CR2E034 (10/03)

4. FEI Number 59-2997350	Applied For
	Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TERVO, TRACE A
1911B E FOWLER AVE
TAMPA, FL 33612

7. Name and Address of New Registered Agent

Name TERVO, TRACE A

Street Address (P.O. Box Number is Not Acceptable)

4803 George Rd, Suite 400
City Tampa

FL Zip Code 33634

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. I am familiar with, and accept the obligations of registered agent.

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
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CEO
NAME TERVO, TRACE
STREET ADDRESS 1911B E FOWLER AVE
CITY-ST-ZIP TAMPA, FL 33612

TITLE CEO
NAME TERVO, TRACE
STREET ADDRESS 4803 George Rd, Suite 400
CITY-ST-ZIP Tampa, FL 33634

TITLE BOD
NAME ZALBA, GARY
STREET ADDRESS 13701 DALE MABRY
CITY-ST-ZIP TAMPA, FL

TITLE BOD
NAME ZALBA, GARY
STREET ADDRESS 13701 DALE MABRY
CITY-ST-ZIP TAMPA, FL

TITLE COO
NAME KATTOS, TINA
STREET ADDRESS 1911-B E FOWLER AVE
CITY-ST-ZIP TAMPA, FL 33612

TITLE COO
NAME KATTOS, TINA
STREET ADDRESS 4803 GEORGE RD, SUITE 400
CITY-ST-ZIP TAMPA, FL 33634

TITLE BOD
NAME KATTOS, PETER
STREET ADDRESS 4401 W 95TH ST
CITY-ST-ZIP OAK LAWN, IL

TITLE BOD
NAME KATTOS, PETER
STREET ADDRESS 4401 W 95TH ST
CITY-ST-ZIP OAK LAWN, IL

TITLE CS
NAME KEKLAS, VIVIAN J
STREET ADDRESS 1911B E FOWLER AVE
CITY-ST-ZIP TAMPA, FL 33612

TITLE CS
NAME KEKLAS, VIVIAN J
STREET ADDRESS 4803 GEORGE RD, SUITE 400
CITY-ST-ZIP TAMPA, FL 33634

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *T Kattos*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/05 8139775739
Date Daytime Phone #