

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # L75495 (6)

1. Corporation Name

ADVANCED CONTROL CORPORATION, INC.

Principal Place of Business

1500 N. W. 62ND STREET, #407
FT. LAUDERDALE FL 33309

Mailing Address

1500 N. W. 62ND STREET, #407
FT. LAUDERDALE FL 33309

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

9. Name and Address of Current Registered Agent

JONES, MATTHEW W.
3995 SW 15TH ST
APT B311
POMPANO BCH FL 33069

3. Date Incorporated or Qualified

05/24/1990

3a. Date of Last Report

04/29/1994

4. FEI Number

65-0198848

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

CORPORATION INFORMATION SERVICES, INC.

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

1201 HAYS STREET

83

84 City

TALLAHASSEE

FL

85 Zip Code

32301

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

Matthew W. Jones

CORPORATION INFORMATION

SERVICES, INC.

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	JONES, MATTHEW W.
STREET ADDRESS	3995 SW 15TH ST, APT B311
CITY - ST - ZIP	POMPANO BCH FL
TITLE	DV
NAME	JONES, DAVID C.
STREET ADDRESS	2660 NE 27TH AVE
CITY - ST - ZIP	LIGHTHOUSE POINT FL
TITLE	DC
NAME	JONES, CHARLES E. JR.
STREET ADDRESS	6 ECHO LANE
CITY - ST - ZIP	CHATHAM MA
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

TIS. 3/9/95

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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, or in an attachment with an address.

SIGNATURE:

Matthew W. Jones

Matthew W. Jones

2/24/95

(305) 491-6660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number