

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L79878** (9)

1. Corporation Name

ADVANCE CONTRACT SERVICES, INC.



Principal Place of Business

Mailing Address

**691 S DIXIE HWY WEST
POMPANO BCH FL 33060
US**

**600 S ANDREWS AVENUE
SUITE 400
FORT LAUDERDALE FL 33301
US**

3. Date Incorporated or Qualified
06/13/1990

3a. Date of Last Report
02/17/1995

2. Principal Place of Business

2a. Mailing Address

21. **1950 NW 15th Street**

26. Suite, Apt. #, etc.

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

23. City & State

Pompano Beach, FL

28. City & State

24. Zip Country

33069

29. Zip Country

33069

4. FEI Number

65-0202066

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BEERMANN, WILLIAM
691 S DIXIE HIGHWAY WEST
POMPANO BCH FL 33060**

81. Name

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

1950 N. W. 15th Street

83. City

Pompano Beach

FL

85. Zip Code
33069

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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
CECERE, RONALD
STREET ADDRESS
691 S DIXIE HWY WEST
CITY-ST-ZIP
POMPANO BEACH FL

TITLE ☐ DELETE

NAME
VPD
STREET ADDRESS
BEERMAN, WILLIAM
CITY-ST-ZIP
691 S DIXIE HWY WEST
POMPANO BEACH FL

TITLE ☐ DELETE

NAME
VPD
STREET ADDRESS
BEERMAN, WILLIAM
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TITLE ☐ DELETE

NAME
VPD
STREET ADDRESS
BEERMAN, WILLIAM
CITY-ST-ZIP
691 S DIXIE HWY WEST
POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
CECERE, RONALD
1.3 STREET ADDRESS
1950 N.W. 15th Street
1.4 CITY-ST-ZIP
Pompano Beach, FL 33069

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
VPD
2.3 STREET ADDRESS
BEERMANN, WILLIAM
2.4 CITY-ST-ZIP
1950 N.W. 15th Street
Pompano Beach, FL 33069

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
VPD
3.3 STREET ADDRESS
BEERMANN, WILLIAM
3.4 CITY-ST-ZIP
1950 N.W. 15th Street
Pompano Beach, FL 33069

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
VPD
4.3 STREET ADDRESS
BEERMANN, WILLIAM
4.4 CITY-ST-ZIP
1950 N.W. 15th Street
Pompano Beach, FL 33069

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
VPD
5.3 STREET ADDRESS
BEERMANN, WILLIAM
5.4 CITY-ST-ZIP
1950 N.W. 15th Street
Pompano Beach, FL 33069

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
VPD
6.3 STREET ADDRESS
BEERMANN, WILLIAM
6.4 CITY-ST-ZIP
1950 N.W. 15th Street
Pompano Beach, FL 33069

14. I do 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)(k), 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-96

305-979-3200

Date

Daytime Phone #

CR2E034 (12/95)