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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L84054

(0)

ADVANCED TECHNOLOGY APPLICATIONS, INC.

Principal Place of Business	5
3750A HACIENDA BLVD FT LAUDERDALE FL 33314	

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

Mailing Address

28. Mailing Address

Suite, Apt. #, etc

3750A HACIENDA BLVD FT LAUDERDALE FL 33314-2825

FILED Feb 25 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Not Applicable

03/25/1996

3. Date Incorporated or Qualified

06/28/1990

65-0270476

4. FEI Number

Suite, Api	I #, eIC.	27 Suite, 7	Suite, Apt. #, etc.				5. Certificate of Status Desired		ቕਲ.75 Ar Fee Red	
Crty & Sta	State City & State 28						Election Campaign Financing Trust Fund Contribution		\$5.00 h Added to	
Zip	Country	Zip		Cou	ntry		8. This corporation has liability for			199.032,
24	25 29 30 9. Name and Address of Current Registered Agent					Florida Statutes X Yes 10. Name and Address of New Registered				
		II Hegistered A	gent		81	Name	10. Name and Address of New At	Aistolan WA	BIIL	
MOSCHELL, WILLIAM E.						Name			_	
19 WEST FLAGLER ST.					82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
1209 BISCAYNE BLDG.										
MIA	AMI FL 33130				63				-	
						City		FL	85 Zip C	ode
office or	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida Such ations of Section	h change was a in 607.0505, Flo	uthorize rida Stat	d by utes	the corpora	poration submits this statement for the pation's board of directors. I hereby acce	ourpose of cl pt the appoin	nanging its itment as r	registered registered
	Signature, typed or purbed name of registered ag		ele (NOTE	: Registere	d Ager	nt signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CEDO AND D	IDECTOR	C IAI 22
12.	ST OFFICERS AN	D DIRECTORS	DELETE	1.1 1	TLE	·····	ADDITIONS/CHANGES TO OFFIC		Change	Addition
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TILLE			DELETE	4.1 71	********				Change	Addition
NAME				4.2 N	AME	ĺ				
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NAME				5 2 Nz	AME	1				
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NAME				6.2 N	WE					
STREET ADDRESS	5			6.3 ST	REET.	ADDRESS				
CITY-ST-ZIP					TY - \$1					
informat	bon indicated on this annual report or	supplemental är	nnual report is tr	ue and a	accu	rate and tha	d in Section 119.07(3)(i), Florida Statute It my signature shall have the same legi In as required by Chapter 607, Florida (al effect as if	made und	der oath; that