


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State


04-29-2005 90248 015 ***150.00

DOCUMENT # M58897 1. Entity Name ADV CONSTRUCTION CORPORATION	
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Principal Place of Business 1844 PLEASANT DR. P.O. BOX 14903, N.P.B. FL JUNO, FL 33408	Mailing Address 1844 PLEASANT DR. P.O. BOX 14903, N.P.B. FL JUNO, FL 33408
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DO NOT WRITE IN THIS SPACE

14009236



04112005 No Chg-P CR2E034 (10/03)

4. FEI Number NOT APPLICABLE	65-0006205	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent VAZQUEZ, ALEJANDRO D. 1844 PLEASANT DR. JUNO, FL 33408	DO NOT WRITE IN THIS SPACE
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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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS VAZQUEZ, ALEJANDRO D. 1844 PLEASANT DR. NORTH PALM BEACH, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT VAZQUEZ, IRENE H. 1844 PLEASANT DR. JUNO, 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		

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: Irene H Vazquez, Irene Vazquez 4/11/05 561-626-2011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #