FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 26, 2001 8:00 am DOCUMENT # P00000050007 **Secretary of State** 1. Entity Name ADVANCED COMMUNICATION TECHNOLOGIES AND SOLUTION 07-26-2001 90005 010 ***150.00 Principal Place of Business Mailing Address 7048 54TH STREET 7048 54TH STREET PINELLAS PARK FL 33781 PINELLAS PARK FL 33781 2. Principal Place of Business Mailing Address 1988 4988 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FINANCIAL FOUNDATIONS, INC. Street Address (P.O. Box Number is Not Acceptable) 3150 SANDY RIDGE DRIVE **CLEARWATER FL 33761** City Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS **C**hange ☐ Addition ☐ Delete TITLE TITLE CLEMENT, EDWIN E NAME NAME 4988 73rd Ave N STREET ADDRESS STREET ADDRESS **7048 54TH STREET** CITY-ST-ZIP PINELLAS PARK FL 33781 CITY-ST-ZIP TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change - ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Addition ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.



AHachments

Advanced Communication Technologies and Solutions, Inc.

July 19, 2001

Florida Department of State

Dear Sir or Ma'am

I am not sure what happened to original notice, prehaps it was sent to my previous address. At any rate new address is now supplied. This is my first bussiness or corporation and was not previously aware of any fees. I have inclosed a check for \$150.00 please except this as payment, if this is not acceptable please notify me so that I may rectify situtation.

Ed Clement (1997)

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Email: e.clement@worldnet.att.net

