

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 04, 2002 8:00 am
Secretary of State

08-04-2002 90156 042 ***550.00

DOCUMENT # **2000000088731**

1. Entity Name

Advance Marketing USA, Inc.

DO NOT WRITE IN THIS SPACE

B0133259

2. Principal Place of Business 8741 Wesleyan Drive		3. Mailing Address 8741 Wesleyan Drive	
Suite, Apt. #, etc. Unit 1401		Suite, Apt. #, etc. Unit 1401	
City & State Ft. Myers, Florida		City & State Ft. Myers, Florida	
Zip 33919	Country USA	Zip 33919	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1040217	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name Steven Snider	
Street Address (P.O. Box Number is Not Acceptable) 8741 Wesleyan Drive	
Unit 1401	
City Ft. Myers	FL Zip Code 33919

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

[Signature]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

7/25/02
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE President	NAME Steven Snider	TITLE	NAME
STREET ADDRESS 8741 Wesleyan Drive Unit 1401	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP Ft. Myers, Florida 33919	CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like information.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/02

941-225-0625
Daytime Phone #

CR2E034B (12/01)