FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
05-07-2002 90239 024 ***158.75

DOCUMENT # P01000117655

1. Entity Name

ADVANCED INSTALLS & SERVICES

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8645 SW 152nd AVE	8645 SW 152nd AVE
Suite, Apt. #, etc. 169	Suite, Apt. #, etc. 169
City & State MIAMI FL	City & State MIAMI FL
Zip 33193 Country USA	Zip 33193 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0533301 ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name MARLA C. THAUREAUX

Street Address (P.O. Box Number is Not Acceptable) 8645 SW 152nd AVE #169

City MIAMI FL Zip Code 33193

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	President/Treasurer FRANCISCO D. HERNANDEZ 8645 SW 152nd AVE #169 MIA. FL
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice. President/Secretary MARLA C. THAUREAUX 8645 SW 152nd AVE #169 MIA, FL
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CR2E034B (12/01)

13. 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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] FRANCISCO D. HERNANDEZ 04/23/02 305-215-1323
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #