

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

01-10-2003 90032 011 ***150.00

DOCUMENT # P02000022271

1. Entity Name
ADVANSA, INC.



Principal Place of Business
4979 MARBELLA ROAD, N.
WEST PALM BEACH FL 33417

Mailing Address
4979 MARBELLA ROAD, N.
WEST PALM BEACH FL 33417

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

03-0403416

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POZO, T. RUBEN

4979 MARBELLA ROAD, N.

WEST PALM BEACH FL 33417

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 11, 2003 Fee will be \$550.00

Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POZO, T. RUBEN 4979 MARBELLA ROAD, N. WEST PALM BEACH FL 33417 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 reports 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: ✓

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/03

Date

(561)236-4523

Daytime Phone #

CR2E034 (10/02)

attachment

38086327
PO2000022271

1 The following security features (and others not listed) exceed industry standards:

Security Features

- Document appearance if altered: Absence or modification of "Original Document" screen on back of check
- Microprint Signature Line: Absence of tiny words or dotted lines appear in signature line
- Chemical Sensitivity: Colored staining spots appear with chemical staining
- Starlock Icon: Absence of padlock icon

Starlock design is a certification mark of Check Payment Systems Association

FEDERAL RESERVE BOARD OF GOVERNORS REG. CC

0000000000

BANK OF AMERICA NA OMA
10630006474 EQ07 98 P22
91/05/03

DO NOT SIGN / WRITE / STAMP BELOW THIS LINE
FOR FINANCIAL INSTITUTION USAGE ONLY

JAN 10 2003

ENDORSE HERE:
DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT # 1009069706

ADVANS INC.
4979 Marbella Rd N
West Palm Beach, FL 33417

DOCUMENT # PO2000022271

1112

DATE JAN. 7, 2003

63-643/670
BRANCH 00263

PAY TO THE
ORDER OF

LOUISIANA DEPARTMENT OF STATE

\$ 150.00

One Hundred Fifty and 00/100 DOLLARS

FIRST UNION

First Union National Bank
firstunion.com
Org. 003 R/T 067006432

CUSTOM BUSINESS BANKING

FOR CORPORATION FEE

[Signature]

1067006432120000111174220 1112

HARLAND 1998

SENT: 01/08/03