## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000156085

17 WINDWARD DR

NEWBORYPORT, MA 01950

Address: City-St-Zip:

tity Name: ADVIGO DEVELOPMENT GROUP

FILED Oct 31, 2005 Secretary of State

Entity Na	me: ADVIGO DEVELOPMENT GRO	DUP, INC.		
Current Principal Place of Business:		New Principal Pla	ce of Business:	
	TCHINSON BLVD APT 120 CITY BEACH, FL 32407			
Current Mailing Address:		New Mailing Addr	New Mailing Address:	
	TCHINSON BLVD APT 120 CITY BEACH, FL 32407			
FEI Number	: FEI Number Applied F	or ( ) FEI Number Not Applicable (X)	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		gent: Name and Address	Name and Address of New Registered Agent:	
11208 HU	TCH, IGOR TCHINSON BLVD APT 120 CITY BEACH, FL 32407 US			
	named entity submits this statemente of Florida.	t for the purpose of changing its registe	ered office or registered agent, or both,	
SIGNATUI	RE: IGOR GOUDOVITCH			
	Electronic Signature of Regist	ered Agent	Date	
	ce with s. 607.193(2)(b), F.S., the corporal mpaign Financing Trust Fund Contribution			
OFFICERS AND DIRECTORS:		• •	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete GOUDOVITCH, IGOR 11208 HUTCHINSON BLVD APT 120 PANAMA CITY BEACH, FL 32407	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete VOSHCHIN, EDWARD 47 LYNDON RD SHARON, MA 02067	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S () Delete KVASNOI, VICTOR	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: IGOR GOUDOVITCH P 10/31/2005