

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000075090

1. Entity Name
ADVANCED GLOBAL INVESTMENT STRATEGIES, INC.



FILED

08 JAN 15 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01152008 Chg-P CR2E034 (12/06) 08

Principal Place of Business
HIDDEN RIVER CENTER, SUITE 300
8875 HIDDEN RIVER PKWY
TAMPA, FL 33637 US

Mailing Address
HIDDEN RIVER CENTER, SUITE 300
8875 HIDDEN RIVER PKWY
TAMPA, FL 33637 US

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

Zip Country Zip Country

4. FEI Number
35-2255485

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KLEVANA, LEIGHTON Q.J.
8312 REVELS RD
RIVERVIEW, FL 33569

7. Name and Address of New Registered Agent
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 1, 2008 Fee will be \$550.00**

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		
TITLE	PCEO	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KLEVANA, LEIGHTON Q.J.		NAME		
STREET ADDRESS	8312 REVELS RD		STREET ADDRESS	8312 Revels Road	
CITY-ST-ZIP	RIVERVIEW, FL 33569		CITY-ST-ZIP	RIVERVIEW, FL	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KLEVANA, LEIGHTON Q.J.		NAME		
STREET ADDRESS	8312 REVELS RD		STREET ADDRESS	8312 Revels Road	
CITY-ST-ZIP	RIVERVIEW, FL 33569		CITY-ST-ZIP	RIVERVIEW, FL 33569	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 January 2008 352 603 1135
Date Daytime Phone #