

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 8:00 am
Secretary of State

01-11-2007 90052 045 ***158.75

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01052007 Chg-P CR2E034 (12/06)

DOCUMENT # P06000116221 1. Entity Name ADVANCED RESEARCH & TESTING, INC.					
Principal Place of Business 7678 15TH STREET EAST SARASOTA, FL 34243			Mailing Address 7678 15TH STREET EAST SARASOTA, FL 34243		
2. Principal Place of Business - No P.O. Box # 2509 Little Country Rd		3. Mailing Address 2509 Little Country Rd			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Parrish, FL		City & State Parrish, FL		4. FEI Number 205140121	
Zip 34219		Country USA		Applied For <input type="checkbox"/> Not Applicable	
Zip 34219		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent OZARK, DAMIAN 2816 MANATEE AVENUE WEST BRADENTON, FL 34205			7. Name and Address of New Registered Agent Name Thomas Steier Street Address (P.O. Box Number is Not Acceptable) 2509 Little Country Rd City Parrish FL Zip Code 34219		
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: 01/05/2007 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEIER, THOMAS 7678 15TH STREET EAST SARASOTA, FL 34243	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	2509 Little Country Rd Parrish, FL 34219
				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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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:				1/5/2007 941-776-2407 <small>Date Daytime Phone #</small>	