2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2008 8:00 am
Secretary of State
05-01-2008 90199 045 ***150.00

DOCUMENT # P07000025848

1. Entity Name
ADVISION NETWORK, INC

66012733

04282008 Chg-P CR2E034 (12/06)

Principal Place of Business	Mailing Address
18202 GULF BLVD REDINGTON SHORES, FL 33708 US	18202 GULF BLVD REDINGTON SHORES, FL 33708 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
824 Brenton Leaf Dr	824 Brenton Leaf Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ruskin, FL	City & State: Ruskin, FL
Zip: 33570 Country: USA	Zip: 33570 Country: USA

4. FEI Number — ☒ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

REGALADO, LUIS J
18202 GULF BLVD
REDINGTON SHORES, FL 33708

7. Name and Address of New Registered Agent

Name: Luis Regalado
Street Address (P.O. Box Number is Not Acceptable)
824 Brenton Leaf Dr
City: Ruskin FL Zip Code: 33570

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: _____ 04/28/08
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P REGALADO, LUIS J 18202 GULF BLVD REDINGTON SHORES, FL 33708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Gerardo Ribas. 824 Brenton Leaf Dr Ruskin, FL, 33570.	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Robert Isaacs 824 Brenton Leaf Dr Ruskin, FL, 33570.	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: _____ 04/28/08 727-366-8760.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #