

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000134632

FILED
Apr 15, 2008
Secretary of State

Entity Name: ADVANCE WEALTH GROUP INC.

Current Principal Place of Business:

8647 BLAZE COURT
DAVIE, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

8647 BLAZE COURT
DAVIE, FL 33328 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARQUHARSON, DONALD
8647 BLAZE COURT
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARQUHARSON, DONALD
Address: 8647 BLAZE COURT
City-St-Zip: DAVIE, FL 33328

Title: VP () Delete
Name: FARQUHARSON, RICHARD
Address: 8720 MIRAMAR BLVD
City-St-Zip: MIRAMAR, FL 33025 US

Title: T () Delete
Name: WEIR, LENNOX
Address: 1730 BAYBERRY DRIVE
City-St-Zip: PEMBROKE PINES, FL 33024

Title: S () Delete
Name: FARQUHARSON, RENEE
Address: 2863 SW 83 TERRACE
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: FARQUHARSON, RENEE K
Address: 2863 SW 83RD TERRACE
City-St-Zip: MIRAMAR, FL 33025

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: DONALD FARQUHARSON

P

04/15/2008

Electronic Signature of Signing Officer or Director

_____ Date