

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000094523

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: ADVANCE TECHNOLOGIES CORPORATION

## Current Principal Place of Business:

2330 LAUREL PINE LN  
ORLANDO, FL 32837

## New Principal Place of Business:

## Current Mailing Address:

2330 LAUREL PINE LN  
ORLANDO, FL 32837

## New Mailing Address:

FEI Number: 26-3570291

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAG TAX SERVICE INC  
2071 E OSCEOLA PKWY  
KISSIMEE, FL 34743 US

## Name and Address of New Registered Agent:

DELGADO, ELEUTERIO  
2330 LAUREL PINE LANE  
ORLANDO, FL 32837 US

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: ELEUTERIO DELGADO

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DELGADO, ELEUTERIO  
Address: 2330 LAUREL PINE LN  
City-St-Zip: ORLANDO, FL 32837

Title: VP ( ) Delete  
Name: DELGADO, NOREL  
Address: 2330 LAUREL PINE LN  
City-St-Zip: ORLANDO, FL 32837

Title: T (X) Delete  
Name: ALVAREZ, SONIA M  
Address: 2330 LAUREL PINE LN  
City-St-Zip: ORLANDO, FL 32837

Title: A (X) Delete  
Name: DELGADO, SOEL  
Address: 2330 LAUREL PINE LN  
City-St-Zip: ORLANDO, FL 32837

Title: S (X) Delete  
Name: DELGADO, WALESKA  
Address: 2330 LAUREL PINE LN  
City-St-Zip: ORLANDO, FL 32837

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DELGADO, ELEUTERIO PRESIDE  
Address: 2330 LAUREL PINE LN  
City-St-Zip: ORLANDO, FL 32837

Title: T (X) Change ( ) Addition  
Name: ALVAREZ, SONIA TREASUR  
Address: 2330 LAUREL PINE LN  
City-St-Zip: ORLANDO, FL 32837

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

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

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: ELEUTERIO DELGADO

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date