

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

•PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P22795 (9)

1. Corporation Name

ADVANTAGE SYSTEMS, INC.



Principal Place of Business

2727 CHEMSEARCH BLVD  
IRVING TX 75062

Mailing Address

2727 CHEMSEARCH BLVD  
IRVING TX 75062

3. Date Incorporated or Qualified  
01/31/1989

3a. Date of Last Report  
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when not stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	LEVY, IRVIN L.	
STREET ADDRESS	2727 CHEMSEARCH BLVD	
CITY - ST - ZIP	IRVING TX	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LEVY, LESTER A.	
STREET ADDRESS	2727 CHEMSEARCH BLVD	
CITY - ST - ZIP	IRVING TX	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LEVY, MILTON P., JR.	
STREET ADDRESS	2727 CHEMSEARCH BLVD	
CITY - ST - ZIP	IRVING TX	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	CLEVELAND, JOSEPH H.	
STREET ADDRESS	2727 CHEMSEARCH BLVD	
CITY - ST - ZIP	IRVING TX	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HETZER, TOM	
STREET ADDRESS	2727 CHEMSEARCH BLVD	
CITY - ST - ZIP	IRVING TX	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	ROBINSON, RICHARD S.	
STREET ADDRESS	2727 CHEMSEARCH BLVD	
CITY - ST - ZIP	IRVING TX	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joe Cleveland

4-22-96

214-438-0255

Date

Daytime Phone #

CR2E034 (12/95)