

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 26, 2001 8:00 am
Secretary of State

06-26-2001 90003 003 ***150.00

DOCUMENT # P22795

1. Entity Name

ADVANTAGE SYSTEMS, INC.

Principal Place of Business

**2727 CHEMSEARCH BLVD
 IRVING TX 75062**

Mailing Address

**2727 CHEMSEARCH BLVD
 IRVING TX 75062**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **75-2219145**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOT Registered Agent's signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!
After MAY 1, 2001
Make Check Payable to Department of State

FEE IS \$150.00
Fee will be \$550.00
to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. 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	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report changed; or on an attachment with an address with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-01

Date

Daytime Phone #

CR2E034 (10/00)