

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000026607

1. Entity Name

ADVANTAGE MANAGEMENT INTERNATIONAL, INC.

Principal Place of Business

107 N VIRGINIA AVENUE
WINTER PARK FL 32789

Mailing Address

107 N VIRGINIA AVENUE
WINTER PARK FL 32789

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 59-3176684

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORELL, CARMEN
107 N VIRGINIA AVENUE
WINTER PARK FL 32789

Name

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

City

State

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

(NOTE: Registered Agent signature required when terminating)

DATE

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

FILE NOW!!! FEE IS \$160.00
After MAY 1, 2001 Fee will be \$650.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P MORELL, TOMAS C 1416 W. BROOKSHIRE CT. WINTER PARK FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VS MORELL, CARMEN R 1416 W. BROOKSHIRE CT. WINTER PARK FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T SANTALIZ, WALTER VIA SAN GABRIELLE #2 GUAYNABO PR	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P MORELL, TOMAS C. 812 Kingsbridge Drive Oviedo, FL 32765	XX Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VS MORELL, CARMEN R. 812 Kingsbridge Drive Oviedo, FL 32765	XX Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition

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 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 11 or Block 12 if changed, or on an attachment with an address, with a letter like empowered.

SIGNATURE

Tomas C. Morell - President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/01 (407)644-7117

Date

Day: the Month: the Year:

CR2E034 (10/00)

0057916

FILED
Apr 30, 2001 8:00 am
Secretary of State
04-30-2001 90362 007 ***150.00

C0054921



DO NOT WRITE IN THIS SPACE