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	#
1. Corporation Name	

SIGNATURE: 7

P93000048687 (6)

THE ADVANTAGE CORPORATION

THE ADVANTAGE CONFORMION					
Principal Place o	of Business	Mailing Address			HI MARKI AKAMI KAKIM MITAK BAHIL BADI SAMI
		1221 NORWOOD PL ORLANDO FL 3280			
				3. Date Incorporated or Qualified 3a 07/13/1993	Date of Last Report 06/22/1995
2. Principa' Plac 21	ce of Business	2a. Mailing Address		4. FEI Number 59-3195366	Applied For Not Applicable
Suite, Apt #	, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	C \$9.75
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	[28] Ζφ	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for intang	
	9. Name and Address of Curr			10. Name and Address of New Regis	
			81 Name		
RODRIG	WEZ, PAUL E		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	ORWOOD PLACE		51 Street Addr	ess (r.e. box Number is Not Acceptable)	
	OO FL 32804		83		
			84 City		les 5. A.d.
			-		FL 85 Zip Code
familiar with	o agent, or both, if the State of Fig. , and accept the obligations of, Se	orida, Sucri Change was author Achon 607.0505, Florida Statuti	nzed by the corporation's boar es.	ation submits this statement for the purpose rd of directors. I hereby accept the appointm	or changing its registered office ent as registered agent. I am
12.	GERGERS A	ND DIRECTORS	NOTE: Registeren Agent signafare reguna 13.	ADDITIONS/CHANGES TO OFFICERS	DATE
THLE	PD	DELETE	1 1 TILE	ADDITIONS/CHANGES TO OFFICER:	S AND DIRECTORS IN 12 Change Addition
NAME	SCHONBAK, MARC		1.2 NAME		C Onlings C Accition
STREET ADDRESS	8109 SPARROW DR		1.3 STREET ADDRESS		
CITY+ST-ZIP	ORLANDO FL 32825		1.4 CITY-S1-ZIP		
TITLE	VSTD	DELETE	2 1 TribE		Change Addition
NAME	RODRIGUEZ, PAUL E		2.2 NAME		
STREET ADDRESS	1221 NORWOOD PLACE		2 3 STREET ADDRESS		
City-St-ZiP	ORLANDO FL 32804		2.4.01fY-S1-ZIP		
TITLE		☐ DELETE	3 1 7111.6		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4 CITY - SI - ZIP		
T.TLE		Dereie	4 1 TILLE		Change Addition
NAME Overer increase			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIF TITLE		□ Dālēit	4.4. C(TY-S1-2IP		El Charles El Addison
NAME			5 1 Title		Change Addition
STREET ADORESS			5.2 NAME		
CITY-SI-ZIP			5.3 STREET ADDRESS. 5.4 CITY+ST+ZIP		
TITLE		DELETE	6 1 TIT, E		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - \$1 - ZIP		
certify that to oath; that is	the information indicated on this an	เกินสะเชียงใช้ or supplemental ar ดอกสำเภอ or the receiver or trus	rnished and does not qualify fi inual report is true and accura tec enjoowered to execute the	or the exemption stated in Section 119.07(3) te and that my signature shall have the same s report as required by Chapter 607, Florida	i least affect as if made updor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR