FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000019301 (8)

ADVANCED TECH INDUSTRIES, INC.

FILED Apr 29 1998 8:00am Secretary of State



| Principal Phone of Dunings | | | | | 1001100141610161019140011140 | ili de im Vo rbi | | 11 (1) |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------------------------------|----------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------|----------------|---------------|
| Principal Place of Business Mailing Address | | | | | | | | |
| 7441 N.W. 8TH ST., UNIT J 7441 N.W. 8TH ST., UNI MIAMI FL 33126 MIAMI FL 33126 | | | | | i | | | |
| mirani FE 55120 mirani FE 5 | | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | 3. Date Incorporated or Qualifier | d | · | |
| | | | | | 03/09/1994 | | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | Ar | oplied For |
| 21 | | 26 | 26 | | 65-0477116 | | | ot Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | | \$8.75 | Additional |
| 22 | | 27 | r | | 5. Certificate of Status Desired | | Fee Ro | equired |
| City & State | | City & State | City & State | | 6. Election Campaign Financing \$5.00 May Be | | | |
| 28 | | 28 | | | Trust Fund Contribution Added to Fees | | | |
| Zıp | Country Zip Co | | Country | 2. This corporation office of has paid the camerit year initial glade | | | tangible | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due June 30. Yes No | | |
| <u> </u> | g. Name and Address of Curren | t Registered Agent | | | 10. Name and Address of New | Registered | Agent | |
| A | RMSTRONG, LANCE ESQ. | | 81 | Name | | | | ŀ |
| 1035 N.W. 11TH AVENUE | | | 62 | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| M | | | | | | | | |
| - | | | B3 | | | | | |
| | | | 84 | City | | - 1 | pe Zin | Code |
| | | | اما | City | | - Fl | 85 Zip | Code |
| 11. Pursuant t | to the provisions of Sections 607.050 | 2 and 607.1508, Florida Statu | tes, the above | -named co | rporation submits this statement for the | purpose r | of changing it | ts registered |
| office or re | egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida, Such change was itions of Section 607.0505. F | authorized by lorida Statutes | the corpora | rporation submits this statement for the ation's board of directors. I hereby acc | ept the ap | pointment as | registered |
| SIGNATURE | , , | | | | | | | |
| SIGNATURE | Signature: typed or printed name of registered age | nt and tire if applicable (NO | TE Registered Age | nt signature requ | uired when reinstating) | DATE | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OF | ICERS AN | D DIRECTOR | RS IN 12 |
| TITLE | D | ☐ DELETE | 1.1 TITLE | | | | Change | Addition |
| NAME | KOURANY, HENRY | | 1.2 NAME | | | | | |
| STREET ADDRESS | 3936 ADRA AVENUE | | 1.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI FL 33178 | | 1.4 CITY-S | T-ZIP | | | | |
| TITLE | D | ☐ DELETE | 2.1 TITLE | | | | Change | ☐ Addition |
| NAME | QUIJANO, PRIMITIVO A | | 2.2 NAME | | | | | |
| STREET ADDRESS | 540 SW 57TH AVENUE APT | . 3 | 2.3 STREET | address | | | | |
| CITY-ST-ZIP | MIAMI FL 33144 | | 2 4 CITY-5 | it-ZIP | | | | : |
| TITLE | | DELETE | 3 1 TITLE | | | | Change | Addition |
| NAME | | | 3.2 NAME | } | | | | 1 |
| STREET ADDRESS | | | 3.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 3.4. CITY - S | IT-ZIP | | | | |
| TITLE | | DELETE | 4.1 TITLE | | | | Change | Addition |
| NAME | | | 4. 2 NAME | | | | | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | | | | |
| CITY-SI-ZIP | | | 4.4 CITY - S | T- ZIP | | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | *** | | Change | Addition |
| NAME | | | 5.2 NAME | | | | | Į |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY - S | | | | | |
| TITLE | | ☐ DELETE | 61 TITLE | | | | Change | Addition |
| NAME | | | 6.2 NAME | | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | | 1 |
| STREET ADDITION | | | 0.3 310001 | nuuni.oo | | | | 1 |

14. Thereby 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 annual report or supplemental enriusal 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 an attachment withhan address

SIGNATURE:

HENRY KOURANY

305-265-775