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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000031153

1. Corporation Name

ADVANCED VICTORY ASSOCIATES, INC.

| Principal P ace | e of Business | Mailing Address | | | | I (SALES) IN 1811 CHAIR SALE SALE | | |
|-------------------------------------|---|-------------------------------|---------------------------------------|-----------------|---------------------|--|--------------------|---------------|
| 15231 SW 154TH AVE 15231 SW 154 AVE | | | | | | | | |
| MIAMI FL 33187 | | | | | | DO NOT WRITE IN THIS SPACE | | |
| US US | | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | | 04/25/1994 | | |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | | | 4. FEI Number | Ap | oplied For |
| 21 | | 26 | | | | 65-0481234 | No | of Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \$8.75 | |
| 22 | | 27 | | | J. Schmede S. Santa | | equired | |
| City & State | e <u> </u> | City & State | | | | 6. Electic n Campaign Financing | * - | Vlay Be |
| 23 | | 28 | Coun | tn. | | Trust Fund Contribution | | to Fees |
| Zip | Country | Zip | 30 | u y | | This corporation owes the current year I Personal Property Tax. | ntangibie ☐ Yes | IZNo . |
| 24 | 9. Name and Address of Current | 29 Agent | 301 | | | 10. Name and Address of New Registers | | |
| | 9. Name and Address of Curren | . Registered Agent | | B1 N | ame | | | |
| VARI | ELA, HECTOR M | | | | | The state of the s | | |
| 15231 SW 154 AVE | | | [{ | 82 S | treet Addr | ess (P.O. Box Number is Not Acceptable) | | |
| MIAN | MI FL 33187 | | 1 | 83 | | | | |
| | // | | | | | | | C rdo |
| | | 1 | | | ity | F | L ' | Code |
| 11. Pursuant | to the provisions of sections 607.050; | and 607.1508, Florida Statut | ـــــــــــــــــــــــــــــــــــــ | ove-na | med corpo | oration submits this statement for the purpose in s board of directors. I hereby accept the app | of changing its | egistered |
| office or n | egistered agent, of both in the State | of Florida, Such change was a | uthorized I | by the | corpor atio | on's board of directors. I hereby accept the app | ointment as re | ę isterea |
| , , | Theta William | | nda Otatot | .00. | | adlesi | ao . | |
| SIGNATURE | Signature, typed or printed name of registered agen | and title if applicable (NOTE | : Registered A | lgent sig | nature reç jirec | d when reinstating DATE | <i>'</i> 7 — | |
| 12. | OFFICERS AN | DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | D DELETE | | 1.1 TITL | 1.1 TITLE | | | Change | ☐ Addition |
| NAME | VARELA, HECTOR M | | 1 2 NAM | 1 2 NAME | | | | |
| STREET ADDRESS | PRISS 15231 SW 154TH AVENUE | | 13 STREET ADDRESS | | DRESS | | | |
| CITY-ST-ZIP | MIAMI FL 33187-5438 | | 14 CITY-ST-ZIP | | • | | | Addition |
| TITLE | D | D DELETE 2.1 T | | .E | [| | ☐ Change | ☐ Addition |
| NAME | VARELA, CARMEN L JR. | | 2.2 NAM | 2.2 NAME | | | | |
| STREET ADDRLSS | | | 2.3 STREET ADDRESS | | DRESS | | | |
| CITY-ST-ZIP | MIAMI FL 33187-5438 | | | 2.4 CiTY-ST-ZIP | | | Change | Addition. |
| -TITLE | | DELETE _ | 3.1 TITL | | -1 | * | Change. | Addiddi |
| NAME | | | 32 NAM | | ļ | | | \ |
| STREET ADDRLSS | | | | REET ADI | - 1 | | | |
| CITY-ST-ZIP | | | 3.4. CIT 4.1 TITL | Y-ST-ZI | P - | | ☐ Change | Addition |
| TITLE | | ☐ DELETE | | _ | | | | |
| NAME | | | 4. 2 NA | | | | | |
| STREET ADDRESS | | | 9 | REETAD | | | | 1 |
| CITY-ST-ZIP | | ☐ DELETE | 4.4 CITY 5.1 TITL | Y-ST-ZIF | - | | Change | Addition |
| TITLE | | | 5.2 NAN | | | | | _ |
| NAME | | | | REET ADI | DRESS | | | İ |
| STREET ADDRESS | · | | 1 | Y-ST-ZIF | i | | | [|
| TITLE | DELETE 6.1 | | | | | | Change | Addition |
| NAME | | | 6.2 NAA | | | | _ , | 1 |
| CTREET ADDRUCE | | | 1 | REET AD | DRESS | | | \ - |

14. Thereful certify that the information supplied with this filing does not qualify for the exemption indicated in Section 119.0 (3)(i), Florida Statutes. I further pertify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signal and 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 is required by Chapter 607. Florida Statutes; and the my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

CITY-ST-ZIP

ZDS-255-9121