

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000050297 (8)

1. Corporation Name

ADVANTAGE WEST PALM BEACH, INC.

FILED

97 JUN 24 PM 12:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

1001 ALT A-1-A  
JUPITER FL 33477

Mailing Address

1001 ALT A-1-A  
JUPITER FL 33477-3227

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

07/07/1994

3a. Date of Last Report

08/06/1996

4. FEI Number

65-0519334

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Law Offices of James Garrity P.A.  
111 MADISON STREET, SUITE  
FIRST FLORIDA TOWER  
TAMPA FL 33602

Address Change  
only

10. Name and Address of New Registered Agent

81 Name - M.  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 220 E. Madison Street, Suite 1202  
84 City Tampa FL 85 Zip Code 33602

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME                | STREET ADDRESS         | CITY - ST - ZIP             | DELETE                   |
|-------|---------------------|------------------------|-----------------------------|--------------------------|
| PTD   | MOERINGS, BERT      | 2329 PROSPERITY BAY CT | PALM BEACH GARDENS FL 33410 | <input type="checkbox"/> |
| VSD   | MOERINGS, MARSHA    | 2329 PROSPERITY BAY CT | PALM BEACH GARDENS FL 33410 | <input type="checkbox"/> |
| VSD   | GONZALEZ, H.R., JR. | 1001 ALT A-1-A         | JUPITER FL 33477            | <input type="checkbox"/> |
| SD    | GARRITY, JAMES      | 111 MADISON #1050      | TAMPA FL 33602              | <input type="checkbox"/> |
|       |                     |                        |                             | <input type="checkbox"/> |
|       |                     |                        |                             | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE                                                                                                                                                | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP | Change                   | Addition                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------|---------------------|--------------------------|--------------------------|
| 2.1 TITLE <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY - ST - ZIP</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> | 2.2 NAME | 2.3 STREET ADDRESS | 2.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1 TITLE <td>3.2 NAME</td> <td>3.3 STREET ADDRESS</td> <td>3.4 CITY - ST - ZIP</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> | 3.2 NAME | 3.3 STREET ADDRESS | 3.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1 TITLE <td>4.2 NAME</td> <td>4.3 STREET ADDRESS</td> <td>4.4 CITY - ST - ZIP</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> | 4.2 NAME | 4.3 STREET ADDRESS | 4.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.1 TITLE <td>5.2 NAME</td> <td>5.3 STREET ADDRESS</td> <td>5.4 CITY - ST - ZIP</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> | 5.2 NAME | 5.3 STREET ADDRESS | 5.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1 TITLE <td>6.2 NAME</td> <td>6.3 STREET ADDRESS</td> <td>6.4 CITY - ST - ZIP</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> | 6.2 NAME | 6.3 STREET ADDRESS | 6.4 CITY - ST - ZIP | <input type="checkbox"/> | <input type="checkbox"/> |

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made by me; 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 on an attachment with an address.

SIGNATURE: H.R. Gonzalez, Jr. [Signature]

4/24/97 511-747-1659

CR2E034 (9/96)