03-02-1999 90048 032 \*\*\*150.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000081547

ADVANC	CED CONSULTING FIRM, INC.				
Principal Plac	e of Business Mailing Address				- 1 10011005 tra (815) dian 23(1) 96(1) 40(1) 20(1) 70(2) 1(0) 2(1) 4(0) 2(1) 140(1)
8798 SW 8TH ST. 13304 SW 22 TERRACE					
SUITE #4 MIAMI FL 33175-1194					DO NOT WRITE IN THIS SPACE
MIAMI FL 33165 US					3. Date Incorporated or Qualifed
03					11/07/1994
7 Dringing D	Place of Business 2a. Mailing Address				4. FEI Number Applied For
2. Principal Place of Business 74 <sup>th</sup> Ave. 2a. Mailing Address 21 5074 WW 74 <sup>th</sup> Ave. 26					65-0532943 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Additional
22 27					Certificate of Status Desired     Fee Required
City & State City & State					6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip Country Zip			Country		8. This corporation owes the current year Intangible Personal Property Tax. Yes \Box
24 53	9. Name and Address of Current Registered Agent	30			10. Name and Address of New Registered Agent
	3. Haile and Addless of Current Registered Agent		81	Name	
RAMOS, CESARE A 13304 SW 22 TR			82	Street Addre	ess (P.O. Box Number is Not Acceptable)
				Officer violation (1 . o. Box violation in the violation)	
MIAMI FL 33175			83		
		ŀ	84	City	85 Zip Code
					pration submits this statement for the purpose of changing its registered
agent. I a	m familiar with, and accept the obligations of, Section 607.0505, Signature, typed or printed name of registered agent and title if applicable (N			signature required	
12.	OFFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	TD DELETE		1.1 TITLE		☐ Change ☐ Addition
NAME	RAMOS, ELENA	1.2 NA	1.2 NAME		
STREET ADDRESS		1.3 STI	REET	ADDRESS	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		Change C Addition
TITLE	PD DELETE	2.1 111	2.1 TITLE		Change Addition
NAME	RAMOS, CESARE A	•	2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE	VSTD DELETE		3.1 TITLE 3.2 NAME		Containing Containing
NAME	RAMOS, FRANK A		3.3 STREET ADDRESS		
STREET ADDRESS	13304 SW 22 TER MIAMI FL				
CITY-ST-ZIP	MIAMI FL DELETE	3.4. CF 4.1 TIT		-217	☐ Change ☐ Addition
TITLE		4.1 III			
NAME expect anopese				ADDRESS	
STREET ADDRESS		4.3 ST			
CITY-ST-ZIP TITLE	DELETE			- 641	☐ Change ☐ Addition
NAME	_	5.2 NA			•
STREET ADDRESS		5.3 ST	REET	ADDRESS	
CITY-ST-ZIP		5.4 CIT	Y-ST-	-ZIP	
			LE		☐ Change ☐ Addition

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 of pushes 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 attemption of the corporation of the receiver of pushes an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS