


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000035348	
1. Entity Name ADVANCED INTEGRATED SERVICES, INCORPORATED	

Principal Place of Business 4700 SOUTHWEST 51ST ST. SUITE 206 DAVIE, FL 33314 US	Mailing Address 4700 SOUTHWEST 51ST ST. SUITE 206 DAVIE, FL 33314 US
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DO NOT WRITE IN THIS SPACE



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0576089	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GAYS, DENNIS
4700 SOUTHWEST 51ST ST.
SUITE 206
DAVIE, FL 33314

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IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GAYS, DENNIS A
STREET ADDRESS	4700 SOUTHWEST 51ST ST., STE. 206
CITY-ST-ZIP	DAVIE, FL 33314
TITLE	CEO
NAME	DANIELS, KENNETH
STREET ADDRESS	4700 SOUTHWEST 51ST ST., STE. 206
CITY-ST-ZIP	DAVIE, FL 33314
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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01/23/08-80106-015 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dennis A Gays 1/14/08 954-797-2232

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Dennis Gays, Pres.