## 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

**FILED** May 19 1998 8:00am Secretary of State

|  | MEN 1 # P9.<br>ADVANCED TECH! | 5000038723 ( NOLOGIES, INC.  | (9)   |               |   | H   |
|--|-------------------------------|--|---|---------------|---|---|
| Principal Place                                | e of Business                 | Mailing Address  | ~ <u>~</u>                                    |               | 1 (09)(180) 110 10101 BILLI DOLLI DOLLI DOLLI BOLOT #                                   | 181 PBULL 19819 11889 HUL 1991                |
| 9251 WEST SUNRISE BLVD<br>PLANTATION FL \$3322 |                               | PLANTATION FL 3  | 9251 WEST SUMPISE BLVD<br>PLANTATION FL 33322 |               | DO NOT WEIGH IN THE   | 00405   |
| US   |                               | U\$  |   |               | DO NOT WRITE IN THIS  3. Date Incorporated or Qualified                                 | SPACE   |
|  |                               |  |   |               | 05/16/1995  | }   |
| 2. Principal Place of Business                 |                               | 2a. Mailing Addres   | is  |               | 4. FEI Number   | Applied For                                   |
| 21 Suite Act # 210                             |                               | 26   | · •   |               | 65-0580640  | Not Applicable                                |
| Suite, Apt. #, etc.                            |                               | <b>⊢</b> -¬  | Suite, Apt #, etc.                            |               | <ol><li>Certificate of Status Desired</li></ol>   | \$8.75 Additional<br>Fee Required             |
| City & State                                   | 9                             | City & State   | · · ·   |               | 6. Election Campaign Financing  | \$5.00 May Be                                 |
| 23   |                               | 28   |   |               | Trust Fund Contribution   | Added to Fees                                 |
| — Zip  | Country                       | Zip  | Cour  | ntry          | 8. This corporation owes or has paid the co   |   |
| 24 25 25 A Name and Address of Curren          |                               | 29 29 of Current Registered Agent  | 30]   |               | Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent |   |
| ÇIE  | RRA, HERNANDO                 | or content riogrational rigidity   |   | 81 Name       | 10, Name and Address of Now Neglateret  | Agent   |
|  | '5 LANDINGS DR APT 2          | 210  |   | 82 Street Add | droop (D.O. Day Mumber is Not Acceptable)   |   |
|  | JDERHILL FL 33319             |  |   | 5119EL MOC    | iss (P.O. Box Number is Not Acceptable)   |   |
| -  |                               | 1  | Ī   | 83            |   |   |
|  |                               |  |   | 84 City       |   | 85 Zip Code                                   |
| 44.5   |                               | 007.0000 1007.4000.51  |   |               | rporation submits this statement for the purpose  | <u>-                                     </u> |
| SIGNATURE                                      |                               | n the State of Florida Such change<br>of the obligations of, Section 607.09<br>register tagent and the if applicable |   |               | ation's board of directors. I hereby accept the ap                                      | pointment as registered                       |
| 12.  |                               | ICERS AND DIRECTORS  | 13,   |               | ADDITIONS/CHANGES TO OFFICERS AN  | ID DIRECTORS IN 12                            |
| TITLE  | DP DELETE                     |  | TE 111111                                     | LE            |   | Change Addition                               |
| NAME   | HERNANDO, SIERRA              |  | 1.2 NAI                                       |               |   |   |
| STREET ADDRESS                                 | OLANTATION CI                 |  | 1.3 STREET ADORESS                            |               |   | ļ   |
| CITY-ST-ZIP<br>TITLE                           | PLANTATION FL                 |  |   | Y-ST-ZIP      |   | Change Addition                               |
| NAME   | (_) biccit                    |  | 2.2 NA  | i             |   | C charge , C Addition                         |
| STREET ADDRESS                                 |                               |  | 2.3 STREET ADDRE                              |               |   |   |
| CITY-ST-ZIP                                    |                               |  |   | Y-ST-ZIP      |   | 1   |
| TITLE  | DELETE                        |  | TE 31 TIT                                     | LF            |   | Change Addition                               |
| NAME   |                               |  | 3.2 NA  | ME            |   |   |
| STREET ADDRESS                                 |                               |  | 33511   | REFT ADDRESS  |   |   |
| CITY-ST-ZIP                                    |                               | T DELE   |   | Y-ST-ZIP      |   | Change Addition                               |
| TITLE<br>NAME                                  | L_J OFLETE                    |  | TE 4.1 TITI<br>4. 2 NA                        | 1             |   | Change Addition                               |
| STREET ADDRESS                                 |                               |  |   | REET ADDRESS  |   |   |
| CITY-ST-ZIP                                    |                               |  |   | Y - ST - ZIP  |   |   |
| TITLE  |                               | DELE   |   |               |   | Change Addition                               |
| NAME   |                               |  | 5.2 NA  | ME            |   |   |
| STREET ADDRESS                                 |                               |  | 5 3 ST  | IEET ADDRESS  |   |   |
| CITY-ST-ZIP                                    |                               |  |   | Y-SI-ZIP      |   |   |
| TITLE  | DELETE                        |  |   |               |   | ☐ Change ☐ Addition                           |
| NAME   |                               |  | 6.2 NAI                                       |               |   | ļ   |
| STREET ADDRESS                                 |                               |  | ı.  | REET ADDRESS  |   |   |
| CITY-ST-ZIP                                    | portify that the information  | Applied with this filing slope and or  |   | Y-ST-ZIP      | n Section 119.07/3)(i) Florida Statutes   further o                                     | partify that the information                  |

is not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an improvered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in states. indicated on this annual report or & officer or director of the corporate Block 12 or Block 13 if changed

4/28/98 (954)382-2166