FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	996		ecretary of State N OF CORPORATIONS		
DOCUM 1. Corporation N	ENT # P9500	0040400	(0)		
ADVANC	e t elecomm unicatio	ONS INTERNATIONA	AL, INC.		
Principal Place of Business		Mailing Address			MBJJ Attrit Matri Giåte Baits mate sane
14962 MARKLAND LANE		14962 MARKLAND LANE			
DELRAY BEACH FL 33484		DELRAY BEACH FL 33484			
				3. Date Incorporated or Qualified 05/18/1995	a. Date of Last Report
2. Principal Place of Business		2a. Mailing Addres	s	4. FEI Number 6.5-93125	Applied For Not Applicable
1		26 Citie Ash Hieto			\$8.75 Additional
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
13		28	T	Trust Fund Contribution Trust Fund Contribution Into corporation has liability for inta	Added to Lees
2 /p	Country	Zip [29]	Country 30	Florida Statutes Yes [No
24	9. Name and Address of Cur			10. Name and Address of New Reg	istered Agent
			81 Name		
LEE, DICI	(R ESQ.		82 Street Ade	dress (P.O. Box Number is Not Acceptable)	
3250 MAI	ry street ste 202		83		
COCONU	T GROVE FL 33133		03		
			84 City		FL 85 Zip Code
11 Pursuant to	the provisions of Sections 607.0	502 and 607.1508, Florida	Statutes, the above-named corp	oration submits this statement for the purpo	se of changing its registered office
	d agent, or both, in the State of f i, and accept the obligations of, S			oration submits this statement for the purpo- lard of directors. Thereby accept the appoint	tment as registered agent. Lani
SIGNATURE					CATE
s	graphic, typed expended came of highward. Of FIGERS	AND DIRECTORS	rante Brigisteria Alient signature resp.	ADDITIONS/CHANGES TO OFFICE	
TITLE •	n/D	DELE	TE 1 1 TITLE		☐ Change ☐ Addition
NAME	MONTUORI, LALA		1.2 NAME		
STREET ADDRESS	14962 MARKLAND LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33484		1.4 CITY ST-ZIF		Change Addition
TITLE		☐ DELE			onunge vivame v
NAME			2.2 NAME 2.3 STREET ADDRESS		
STREET ADDRESS			2 4 CITY - ST - ZIP		
DITY - ST - ZIP		DELE		*	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY - ST - ZIP		DELE	3.4 CHY-ST-ZIP TE 4.1 TITLE		Change Addition
TITLE		Ŭ pere	4 2 NAME		
NAME expert appares			43 STREET ADDRESS		
STREET ADDRESS CITY+ST-ZIP			4.4 Cil Y - ST - Z-P	20000182	4092
TITLE		☐ DELI		20000182 -05/16/960102	7011Change Addition
NAME			5.2 NAME	***200.00	
STREET ADDRESS			5 3 STHEET ADDRESS		
CITY-S1-ZIP		[] DEL	5 4 C/TY - ST ZIP		Change Addition
TITLE		DEL	ETE 6 1 TITLE 62 NAME		- 1000R
NAME exocel appears			63 STHEFT ADDRESS		Year
STREET ADDRESS			64 Cd Y - ST - 7/F		51-96
14. Lido hereb	y certify that the information supp	oled with this filing is volunt	arily furnished and does not quali	by for the exemption stated in Section 119.0 purate and that my signature shall have the section removed as required by Chanter 607. Flor	7(3)(k), Florida Statutes Tfurther ame legal effect as if made under
cartify that oath; that appears in	the information indicated on this Lam an officer or director of the G Block 12 or Block 13 if changes	annual report or suppleme corporation or the receiver J. or the an attachment with	ental alimbal report is true and according to execute and address	wrate and that my signature shall have the sethis report as required by Chapter 607, Flor	ida Statutes, and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96

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CR2E034 (12/95)