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FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000047225
 1. Corporation Name

ADVANTAGE AMERICA CORPORATION

Principal Place of Business: **1718 E. 7th Ave Ste 301 Tampa FL 33605**
 Mailing Address: **1718 E. 7th Ave Ste 301 Tampa FL 33605**

3. Date Incorporated or Qualified: **06/14/1995**
 3a. Date of Last Report: **03/08/96**
 4. FEI Number: **59-3323793**
 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

2. Principal Place of Business: **21**
 Suite, Apt. #, etc.:
 City & State: **23**
 Zip: **24** Country: **25**
 2a. Mailing Address: **26**
 Suite, Apt. #, etc.:
 City & State: **27**
 Zip: **28** Country: **30**

9. Name and Address of Current Registered Agent
MCKEE, ROBERT F ESQ.
1718 E. 7TH AVENUE STE 301
TAMPA FL 33605

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **85** Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	SCHLANGEN, EDWARD R	
STREET ADDRESS	19823 GULF BLVD #6	
CITY-ST-ZIP	INDIAN SHORES FL 34635	
TITLE	VP/D	<input checked="" type="checkbox"/> DELETE
NAME	GEORGE E SCHLANGEN	
STREET ADDRESS	1028 BEVERLY	
CITY-ST-ZIP	WHEELING IL 60090	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DEBRA A MAKI	
STREET ADDRESS	6407 30TH AVENUE	
CITY-ST-ZIP	KEONSHA WI 53142	
TITLE	S/T/D	<input type="checkbox"/> DELETE
NAME	DOUG POWELL	
STREET ADDRESS	10115 WILMOT RD	
CITY-ST-ZIP	Kenosha WI 53142	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P/D
STREET ADDRESS	CATHERINE M. SCHINLER
CITY-ST-ZIP	2950 94TH AVE N SEALAND FL 32777
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDWARD R. SCHLANGEN
STREET ADDRESS	19823 GULF BLVD #6
CITY-ST-ZIP	INDIAN
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	600002184456
STREET ADDRESS	-05/20/97--01009--018
CITY-ST-ZIP	***173.75
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CS
STREET ADDRESS	518197
CITY-ST-ZIP	

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 under oath. 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: *E. Schlangen V.P.* **4/28/97** **595-5715**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFCF034 (7/96)