## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**CORPORATION ANNUAL REPORT** 

1997



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000050548 (3)

ADVANCED TECHNOLOGIES GLOBAL MARKETING SERVICE, INC.

Principal Place of Business

Mailing Address

## **FILED** May 02 1997 8:00am Secretary of State



3989 QARAMBOLA CIRCLE NORTH COCONUT CREEK FL 33066				3989 CARAMBOLA CIRCLE NORTH COCONUT CREEK FL 33086-2450			·				
								3. Date Incorporated or Qualified 06/26/1995	alified 3a. Date of Last Report 05/01/1996		
2. Principal Place of Business				2a. Mailing Address				4. FEI Number			oplied For
21				26				65-0622838	65-0622838 Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired See Required			
City & Ciato				City & State							- 1
City & State			-	<del>                                      </del>				Election Campaign Financing     Trust Fund Contribution			May Be
Zip Country			120	Zip   Gountry				Trust Fund Contribution LJ Added to Fees  8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29			~ ·	30]			Florida Statutes			
9. Name and Address of Current								10. Name and Address of New Registered Agent			
YDE	<del></del>		···	<u> </u>		81	Name		<del></del>		
KREPEL, LINDA L 3989 CARAMBOLA CIRCLE NORTH						00	Otreat	LAddress (D.O. Deu Nillesher is Mot Acceptable)			
COCONUT CREEK FL 33066						82	Street A	Address (P.O. Box Number is Not Acceptab	oie)		
000	ONUI ON	EN FL 33000				83		<u> </u>			
÷ .						84	City		FL	<b>85</b> Zip	Code
11. Pursuant t office or re agent. Lar	to the provis egistered ag m familiar w	ions of Sections ( ent, or both, in that th, and accept the	507.0502 and ie State of Fla ne obligations	d 607.1508, Florid orida Such chang s of, Section 607.0	a Statutes, ti ge was autho 5505, Florida	he abov orized b Statute	I e-named y the corp s.	corporation submits this statement for the poration's board of directors. I hereby accept		nanging in	ts registered registered
SIGNATURE		•	-								
OJUMATORE .	Signature, typed	or printed name of reg			(NOTE Reg	jislered Ag	int's griature	required when reinstating)	DATE		
12.	·	OFFICE	RS AND DIF			13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	Р			[□ DE	LETE	1.1 TITLE		I	L.	Change	Addition
NAME KREPEL, LINDA L				_		1,2 NAME					
STREET ADDRESS 3989 CARAMBOLA CIRCLE NOI				1		1,3 STREET	ADDRESS				
CITY-ST-ZIP	COCONU	<u>it creek fl 3</u>	3066			1/4 CITY - S	ST-ZIP			1	- Line
·TITLE				☐ DE		2 1 TITLE			L.	Change	Addition
NAME						2,2 NAME					
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'NAME						3,2 NAME					
STREET ADDRESS						3,3 STREE	ADDRESS				
/CITY-ST-ZIP						3,4 CITY-	ST - ZIP				
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NAME						4.2 NAME					
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NAME					i	5,2 NAME					
STREET ADDRESS					ŀ	53 STREE	ADDRESS				
CITY-ST-ZIP						5,4 CHY-	S1 - 21P				
TITLE				☐ DE	l.ETE	61 TITLE				Change	Addition
Name						6,2 NAME					
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP	:				6.4 CITY-		·				
All 1 91.5%	<del> </del>					9 7 011 12		L			

Information indicated on this annual report or 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 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