## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000055810

Name:

Address:

City-St-Zip:

GAVAGNI, DONALD A

FORT LAUDERDALE, FL 33322

8397 NW 25TH CT

Entity Name: ADVANCED ELEVATOR SERVICE, INC.

FILED Apr 02, 2009 Secretary of State

•		,			
Current Principal Place of Business:			New Principal Place of Business:		
20 STREE FORT LAU		L 333255420 US			
Current Mailing Address:			New Mailing Address:		
20 STREE FORT LAU		L 333255420 US			
FEI Number	: 65-0597872	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
The above	20 ST. . 333255420 t named entity e of Florida.		ourpose of changing its registered	l office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD ( BUTLER, DALE 14011 SW 20 DAVIE, FL 333	ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ELDON, WALT 8306 NW 74TH TAMARAC, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	VP (	) Delete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: DALE M. BUTLER PRES 04/02/2009