## 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

DOCUMENT # P95000061853 (4)

ADVENT TECHNOLOGY SYSTEMS, INC.

Country

g. Name and Address of Current Registered Agent

25

WHEELER, STEVE 2701 W BUSCH BLVD

**TAMPA FL 33618** 

Principal Place of Business

Mailing Address

2a. Maiting Address

City & State

Zip

Suite, Apt. #, etc.

26

28

29

2701 WEST BUSCH BOULEVARD TAMPA FL 33618

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

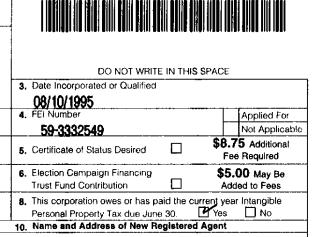
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24

Zip

2701 WEST BUSCH BOULEVARD TAMPA FL 33618

FILED May 01 1998 8:00am Secretary of State



Zip Code

Street Address (P.O. Box Number is Not Acceptable)

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, and account the obligations of Section 607.0505. Florida Statutes.

Country

B1 Name

82

**83** City

30

SIGNATURE	Signature, typed or punted name of registered agent and litter's	ppl cable (NOI	L. Registered Agent signature required	when reinstating)	DATE	
12.	OFFICERS AND DIRECT	ORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTOR	IS IN 12
TITLE	PO	DELETE	11 TITLE		Change	Addition
NAME	WHEELER, STEVEN I		1.2 NAME			
STREET ADDRESS	2701 WEST BUSCH BOULEVARD		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL 33618		1.4 C(TY-ST-Z)P			
ITLE	<b>S</b> TD	DELETE	2 1 1IILE		☐ Change	Addition
NAME	WHEELER, JANIE S		2.2 NAME			
STREET ADDRESS	2701 WEST BUSCH BOULEVARD		2 3 STREET ADDRESS			
CITY-ST-ZiP	TAMPA FL 33618		2. 4 CITY-ST-ZIP			
ITLE		DELETE	3 1 TITLE		Change	Additio
AME			3.2 NAME.			
TREET ADDRESS			3.3 STREET ADDRESS			
ITY-ST-ZIP	-		3.4. C(1Y - S1 - Z(P			
TLE		DELETE	4.1 TITLE		☐ Change	Additio
IAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
XTY-ST-ZIP	_		4.4 CITY - ST - ZIP			
TLE		DELETE	5.1 TITLE		Change	Addition
IAME			5.2 NAME			
TREET ADDRESS			5.3 STREET ADDRESS			
ITY-ST-ZIP			5.4 CITY - ST - ZIP			
ITLE		DELETE	6.1 TITLE		☐ Change	Addition
LAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
PITV - CT - 710			מול די עדני א			

14. I 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 amount eport 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 processor of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on available ment with an address.

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