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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000034929 (5)

ADVANCE INT'L. SALES GROUP INC.

7378 W ATLANTIC BLVD SUITE 205 7378 W ATLANTIC BLVD SUITE 205 MARGATE FL 33063-4207 MARGATE FL 33068 3. Date Incorporated or Qualified 3a. Date of Last Report 04/18/1996 2a. Mailing Address 4. FELNumber Applied For 2. Principal Place of Business 65-064150 26 Not Applicable 21 Suite, Apt. #, etc Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Žφ Country This corporation has liability for intangible tax under s. 199.032, 25 29 30 Florida Statutes Yes No 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name GRANT, PATSY 7378 W ATLANTIC BLVD SUITE 205 82 Street Address (P.O. Box Number is Not Acceptable) MARGATE FL 33068 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature type diseliprinted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) 12 13. DELETE Change Addition 1.1 TITLE Till: F **GRANT. PATSY** 12 NAME NAME 7378 W ATLANTIC BLVD SUITE 205 13 STREET ADDRESS STREET ADDRESS MARGATE FL 33068 1.4 CITY-ST-ZIP CITY-ST-ZIE DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY - 51 - 71P DELETE Change Addition 31 TITLE TUTLE NAM: 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHY - \$1 - 20 DELETE Change Addition THUE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHTY- ST-201 Change DELETE Addition 5.1 TITLE TITLE 5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 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; 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

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

THILE

STREET ADDRESS

STREET ADDITESS.

CITY - ST - ZIP

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

DELETE

Change

Addition

FILED

Apr 15 1997 8:00am

Secretary of State