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

FILED May 18 1998 8:00am Secretary of State

DOCUMENT # P96000046785 (7)

ADVANCED TRENDS CENTER, INC.

Principal Place of Business		Mailing Address			1 IBBNIUSH INU UNIN UNIN UUTIN UBHIL DURAN	81111	O) \$111 1001	
4404 COBIA DRIVE		4404 COBIA DRIVE		}				
TAMPA FL 33	1617	TAMPA FL 33617	TAMPA FL 33617		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			1
					05/28/1996			
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Ar	pplied For]
21		26			59-3384623		ot Applicable	_
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional equired	ļ	
City & State		City & State					1	
23		28			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip Country		Zip	Country		8. This corporation owes or has paid the			1
24 25		29	30		Personal Property Tax due June 30.] No	
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent		1
AL	Fonso, suzette esquire		81	Name				
AL	FONSO & OHALL, P.A.		82	Street Add	fress (P.O. Box Number is Not Acceptable)			1
	SOUTH HYDE PARK AVENUE		83					1
TAI	MPA FL 33606		63	`i				
			84	City		85 Zip	Code	1
11 Pursuant	to the provisions of Sections 607 050	02 and 607 1508. Florida Stati	ites, the abov	e-named cor	poration submits this statement for the purpos	e of changing it	ts registered	4
office or a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was	autrior zed b	withe cornora	ition's board of directors. I hereby accept the	appointment as	registered	
	am rammar with, and accept the oping	Attoris of, Section 607.0303 F	TOTICA STATUTE	:5				-
SIGNATURE	Signature, typed or printed number of registered ag	errand the diapplicable (NO	ITE Hog stered Aç	gent signature requ	ired when reinstating) DAT	Ē] <u>{</u>
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS			٤
TITLE	D	DELETE	1 + TITLE			Change	Addition	1
NAME	VALDEZ, ROSANNE		1.2 NAME	ļ				2
STREET ADDRESS	4404 COBIA DRIVE			LADDRESS				Įŭ
CITY - ST - ZIP	TAMPA FL 33617	DELETE	1 4 City - 2 1 Title	ST-ZIP		Change	Addition	٩Ļ
TITLE NAME	D Valdez, anthony r					Change	L_] Addition	`
STREET ADDRESS	4404 COBIA DRIVE		2.2 NAME	1 ADDRESS				1
CITY-ST-ZIP	TAMPA FL 33817		2 4 City-	1				1
TITLE	D	DELETE	31 TITLE	31.41		Change	Addit-on	1
NAME	SUAREZ, MELBA	_	3.2 NAME	Ì				1
STREET ADDRESS	4404 COBIA DRIVE		3.3 STREE	T ADDRESS				1
CITY-ST-ZIP	TAMPA FL 33617		34 CITY	ST-ZIP				
TITLE		DELETE	4.1 TITLE			Change	Addition	1
NAME			4 2 NAME	:				
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-S1-ZIP			4 4 CITY -	ST - ZIP				1
TITLE	☐ DELETE		51 TITLE	1		Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			1	T ADDRESS				
CITY - ST - ZIP		DELETE	5.4 CITY -	ST - ZIP		Change	Addition	\downarrow
TITLE		□] DETEIE	6 1 TITLE	1		∟ ∪nange	TT Addition	
NAME AXDEET ADDRESS	}		6.2 NAME	ſ				1
STREET ADDRESS			63 STREE	T ADDRESS				-
131Y+S1-7P	1		■ 64 DTY -	NI-719 I				

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

SIGNATURE:

TURBUNG TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

128/98

(BC) 988-4581