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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000058259 (8)

ADVANCE FUTURETECH, INC.

Principal Place of Business		Mailing Address		THE STATE OF	
1430 S. ANDREWS AVE. POMPANO FL 33069		1430 S. ANDREWS AVE.			
FOMPANO FL	55000	FOMPANO FL SOURFILLS			a. Date of Last Report
	lace of Business	2a. Mailing Address	······································	4. FEI Number 65-067.97/4	Applied For
Suite, Apt.	# inte	Suite, Apt. #, etc.		67-06/7/19	Not Applicable
22	F. Citc.	27 Suite, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	· · · · · · · · · · · · · · · · · · ·	28		Trust Fund Contribution	
Zφ	Country	Zip	Country	8. This corporation has liability for intan	
24	25		10	Florida Statutes	
<del>-</del> ,	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registe	ereß Agent
HUXABLE, HOWARD  81 Na			81 Name		
1430 S. ANDREWS AE.			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
POMPANO FL 33069					
			83		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Statutes	the above-named corn		FL 69 Zip Code
office or r agent. La	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such change was au igations of, Section 607.0505, Flori	thorized by the corporat da Statutes.	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	e appointment as registered
SIGNATURE	Signature, typed or posted name of registered a	greet and tan if applicable (NOTE:	Registered Agent signature requir	red when rejectating)	ATE
12.		IND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TITLE	110011011011111111111111111111111111111	Change Addition
NAME	SMITH, CHRISTOPHER L		1.2 NAME		
STREET ADDRESS	110 S.E. 6TH ST. 28TH		1,3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO FL 33069		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TUTLE		Change Addition
NAME	HUXABLE, LINDA	_	2.2 NAME		The currence of the current
STREET ADDRESS	110 S.E. 6TH ST. 28TH		2.3 STREET ADDRESS		
City+S1+ZiP	POMPANO FL 33068		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		_	3.2 NAME		the street that resolution
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CHY-ST-ZIP		
THILE		☐ DELETE	4.1 TITLE		Change Addition
NAME		_	4. 2 NAME		the same of the sa
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAM:		***	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - S1 - ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		the consignation that the constant
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - S1 - ZIP					
GHT: 51-ZIP			6.4 CITY-ST-ZIP		··········

4. I do hereby cert ly 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:

MATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

2/8/97 954)781-3843

**FILED** 

Feb 07 1997 8:00am

Secretary of State