

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000066787

FILED
Jan 04, 2005
Secretary of State

Entity Name: ADVANCED MARKETING SOLUTIONS, INC.

Current Principal Place of Business:

3160 N.E. 164TH STREET
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

3160 N.E. 164TH STREET
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 65-0691831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOWSKY, JAY H ESQ.
150 W. FLAGLER ST
SUITE 2000
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FAMBRINI, DAVID P.
Address: 3160 NE 164 ST
City-St-Zip: MIAMI, FL 33160

Title: VP () Delete
Name: FAMBRINI, ALISA
Address: 3160 NE 164TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: DAVID FAMBRINI

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date