2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P97000010194 DOCUMENT # 1. Entity Name

ADVANTAGE ASSOCIATES REALTY, INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91439 012 ***150.00

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|--|--|---------------------------|----------------------|--|---------------------------------------|--|-------------------------------|
| Principal Place of Business 2128 NE-120RD ST 1,3899 BI SCAYNE BIN 2126 NE-120RD ST 13899 BISCAYNE KIND NO-SUITE NO. SUITE 145 NO-SUITE NO. SUITE 145 | | | | | | | |
| NORTH MIAMI FL 33191 NM B , F1 . 33 181 NORTH MIAMI FL 33181 NM D , FC . 33181 | | | | | | | |
| 2. Principal Place of Business 13899 BISCAYNE BIVD 3. Mailing Address BIVD 13899 B. | | | | yne Blu | • | | HOLD HOTTL WINE TOWN |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | <u> </u> | E.IF MAKING CHANG | ES |
| City & Stat North | Miami BEACH, FC. | City & State | Miami | Beach, FI | 4. FEI Number 65-073610 | 09 | Applied For Not Applicable |
| Zip 33/8 | S/ Country DADE | Zip 33781 | Country | ADE | 5. Certificate of Status Desired | □ \$8.75 Fee Req | Additional uired |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | | | |
| MARK CANDY | | | | Name | | | |
| WYNN, CANDY L | | | | Street Address (P.O. Box Number is Not Acceptable) | | | |
| 2128 NE 123RD ST 13899 Bis cayne Blvd # 145 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| SUITE 21 | 4-A | 7. 2016 | | | | | ļ |
| | HAMIFL 33181 NMB, F | | | City | | FL Zip C | |
| 8. 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. I am familiar with, and accept | | | | | | | |
| the obligations of registered agent. | | | | | | | |
| SIGNATURE . | Mully | wa | | | 4. | <u> 24- 03</u> | |
| | Signature, typed or printed name of registered agent an | nd title if applicable. | (NOTE: Registered Ag | ent signature required | when reinstating) | DATE | |
| | ILE-NOWIII-FEE IS \$150:00 | | | | | Tinonging (M | |
| After | May 1, 2003 Fee will be \$550.00 | | | 9Election Campaign Trust Fund Contribu | | 5:00 May Be | |
| Make Check | Payable to Florida Department of | State | | | | | } |
| 10. | OFFICERS AND D | DIRECTORS | 11. | | ADDITIONS/CHANGES TO O | FICERS AND DIRECT | ORS IN 11 |
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| NAME | WYNN, CANDY L | Bisanne B | /Ud NAME | , | | | |
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| STREET ADDRESS CITY-ST-ZIP | | | STREET A | | | | ĺ |
| | partify that the information available with the | this filing does not such | _ | | ation 110 07/2)/i) Florida Ct-t-t- | i further earlify the 4 th | o information |
| indicated | certify that the information supplied with t | inia ming does not quali | ry for the exemp | uon siaitu III 560 chall bayo the n | unon i ratur (a)(i), riollud Statute: | s. Fruiting Certify Hidt If roath: that I am an offic | cor or director |

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made those dail; that if an an office of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. changed, or on an attachment with an address, with all other like empower

SIGNATURE: