

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90106 041 ***158.75

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| DOCUMENT # P97000020967 | |
| 1. Entity Name ADVANCED COMMUNICATIONS TECHNOLOGIES, INC. | |



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|---|---|
| Principal Place of Business 420 LEXINGTON AVENUE SUITE 2739 N.Y.N.Y, NY 10170 | Mailing Address 420 LEXINGTON AVENUE SUITE 2739 N.Y.N.Y, NY 10170 |
|---|---|

60011934



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| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

02022007 Chg-P CR2E034 (12/06)

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| 4. FEI Number 65-0738251 | Applied For <input type="checkbox"/> Not Applicable |
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

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| 6. Name and Address of Current Registered Agent LICHTMAN, JONATHAN J P.A. 120 E PALMETTO PARK RD SUITE 100 BOCA RATON, FL 33432-0000 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PCED DANSON, WAYNE I 420 LEXINGTON AVE STE 2739 NEW YORK, NY 10170 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | JOHN E DONAHUE JOHN E DONAHUE 420 LEXINGTON AVENUE, STE 2739 NEW YORK, NY 10170 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ROCHE, WILBANK J 520 SOUTH SEPULVEDA BLVD., SUITE 310 LOS ANGELES, CA 90049 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | STEVEN J MILLER 420 LEXINGTON AVENUE, STE 2739 NEW YORK, NY 10170 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD LICHTMAN, JONATHAN J 120 PALMETTO PARK RD STE 100 BOCA RATON, FL 33432 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PROUTY, RANDALL 1900 DECKER SCHOOL LANE MALIBU, CA 902652339 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PROUTY, RANDALL 28310 ROADSIDE DRIVE, Suite 120 AGORA HILLS, CA 91301 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FINCH, MICHAEL R DR. 37 WALNUT ST., 10 WELLESLEY, MA 02481 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD NEILSON, MARTIN 420 LEXINGTON AVE STE 2739 NEW YORK, NY 10170 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard LCO Date: 2/2/07 Daytime Phone #: 646 2271600