SIGNATURE:

2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 22, 2005 08:00 AM Secretary of State **DOCUMENT # P97000031606** 1. Entity Name PHOÉNIX ADVANCED, INC. Principal Place of Business Mailing Address 115 S 10TH ST 9535 SILVER LAKE DR HAINES CITY, FL 33844 LEESBURG, FL 34788 01212005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3450285 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent COSTELLO, JAMES DO NOT WRITE 9535 SILVER LAKE DRIVE LEESBURG, FL 34788 IN THIS SPACE 8. The above named entity submits th proose 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 # Signature, typed or printed na (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE COSTELLO, JAMES NAME STREET ADDRESS 9535 SILVER LAKE DR CITY-ST-ZIP LEESBURG, FL 34785 U00000322998 TITLE 04/22/05-80038-001 150.00 NAME STREET ADDRESS CATY - ST - ZIP TILLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP me IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE name STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS City -ST-7IP 12. I hereby certify that the information supplied indicated on this report or supplemental re-of the corporation or the receiver or trustee changed, or on an attachment with an addr with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information it is five and accorded and that my signature shall have the same legal effect as if made under oath; that I am an officer or director property to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

G OFFICER OF DIRECTOR

FILED