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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000049676 (4)

ADVANTAGE SERVICES GROUP INC.

FILED Feb 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
7155 AYRSHII			7155 AYRSHIRE LANE						
BOGA RATON	I FL 33496	BOCA RATON FL	BOCA RATON FL 33496			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						06/05/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ar	oplied For
21		26	26			65-0761070		No	ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, et	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
22		27	 						equired
City & State)	City & State				6. Election Campaign Financing	П		May Be
Zip	Country	Zip	Zip Country			Trust Fund Contribution 8. This corporation owes or has pa	مراط المراس		to Fees
24	25	29	30	ıı y		Personal Property Tax due June	-	' _	No
[24]	9. Name and Address of Curre					10. Name and Address of New Re			3,.0
WA	GNER, WARREN	 		81	Name		· - · · · · · · · · · · · · · · · · · ·		
	5 AYRSHIRE LANE		82			ss (P.O. Box Number is Not Acceptal	ale)		
	CA RATON FL 33498		62 Street			ess (r.o. Box Number is Not Acceptat	Jie)		
•				83					
				84	City		FL	1 1	Code
11. Pursuant t	o the provisions of Sections 607.050	02 and 607 1508, Florida	Statutes, the ab	ove-	named corpo	oration submits this statement for the	ourpose of	changing it	ts registered
office of re	egistared agent, or both, in the State m _i familiar with, and accept the oblig	e of Florida. Such change jations of, Section <u>6</u> 07.05	i was autnorized 0 5, Florida Statu	ites.	ine corporatio	on's board of directors. I hereby acce	pt the appo	Jintment as	registered
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am filmiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable (NOTE Re					it signature required		DATE	5,55555	
12. TITLE	PRESIDENT	I here	13. TE 1.17(T)	t.		ADDITIONS/CHANGES TO OFFIC	JERS AND	Change	Addition
NAME	WASH WASH	VOT	12 N					Unungo	7,001,011
NAME STREET ADDRESS CITY-ST-ZIP WA T'EN WASN'S CITY-ST-ZIP BOLA RATON FL		LANE		1.2 NAME 1.3 STREET ADORESS					
CITY-ST-ZIP	BOLA RATON FO	33496		1.4 CITY-ST-ZIP					
TITLE	200., , , , , , ,	☐ DELE			-211	······································		Change	Addition
NAME			2.2 NA	2.2 NAME					
STREET ADDRESS			2.3 \$		ADORESS				
CITY-ST-ZIP			2 4 CII	2 4 CITY-ST-7IP					ì
TITLE		DELE	TE 3.1 TITI	3.1 TITLE			-	Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STF	EET A	ADDRESS				
CITY-ST-ZIP		<u></u>	3.4 CITY		T - ZIP				
TITLE		☐ DELE	TE 4.1 TITO	4.1 TITLE				Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EE1 A	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-\$1-	- ZIP				
TITLE	☐ OELETE		TE 5.1 TITE	5.1 TITLE				Change	Addition
NAME			5.2 NAM	AE					
STREET ADDRESS			5.3 STR	EFT A	ADDRESS				
CITY-ST-ZIP			5.4 CIT		- ZIP			Observed	A A A Second
TITLE		☐ DELE						Change	Addition
NAME			6.2 NA						
STREET ADDRESS	•				ADDRESS				
CITY-ST-ZIP		90 40 20 41 - 20 - 20 - 20 - 20 - 20 - 20 - 20 - 2	6.4 CIT	Y-ST-	- ZIP	Cention 110 07(2)(i) Florido Statulas	further co	s.C. alone alon	in farmation.

14. I hereby certify 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 eath; 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.

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