## 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 # P97000073859 (5)

ADVANTAGE FLORIDA SERVICES CORP.

Principal Place of Business

1750 NE 40TH ST FT LAUDERDALE EL 33334 Mailing Address

1750 NE 40TH ST FT LAUDERDALE FL 333

## FILED May 04 1998 8:00am Secretary of State



3. Date Incorporated o 08/26/1997  2. Principal Place of Business  2a. Mailing Address  4. FEI Number 65-078  Suite. Apt. #. etc.	r Qualified
21 2787 E. OAK UND PK BUD 26 65-078	
2110-101-01-01-01-01-01-01-01-01-01-01-01	Applied For
Culto Ant B sta	
E Cortificate of Status	Desired S8.75 Additional
22 Sente 203 27	Fee Required
City & State  City & State  6. Election Campaign F  Trust Fund Contribut	
	· <del>····</del>
	es or has paid the current year Intangible ax due June 30. Yes
	of New Registered Agent
KOLOWICH, ANDREW G 81 Name	
TEA NE ACTU OT	
: FT LAUDERDALE FL 33334	ot Acceptable)
83	
84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statem office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I h	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I have familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ereby accept the appointment as registered
•	
SIGNATURE Signature, typed or proceed name of registered agent and tribe it applicable (NOTE: Registered Agent signature required when reinstating)	DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS IN 12
TITLE DELETE 1.1 TITLE	Change Addition
NAME KOLOWICH, ANDREW G 1.2 NAME	
STREET ADDRESS 1750 NE 40TH ST 1.3 STREET ADDRESS	
CITY-ST-ZIP FT LAUDERDALE FL 33334 1.4 CITY-ST-ZIP	
TITLE DELETE 2.1 TITLE	Change Addition
NAME 2.2 NAME .	* · · · · · · · · · · · · · · · · · · ·
STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP         2.4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE	☐ Change ☐ Addition
NAME 3.2 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	Change Addition
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAMF	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	Channe Addition
CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         □ DELETE         5.1 TITLE	☐ Change ☐ Addition
CITY-ST-ZIP	☐ Change ☐ Addition
CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP	
CITY-ST-ZIP	☐ Change ☐ Addition ☐ Change ☐ Addition
CITY-ST-ZIP	

14. Thereby 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 a furate 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 trusted 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.

A. Paz 1000/ 060/11/201