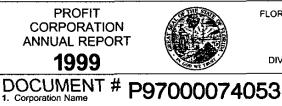
SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



INADVANCE TECHNOLOGY GROUP CORPORATION

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Aug 02, 1999 8:00 am Secretary of State

08-02-1999 90009 021 ***550.00 08-02-1999 90009 022 *****8.75

Principal Place of Business Mailing Address							
6135 NW 167 ST 6135 NW 167 ST							
STE E14 STE E14 MIAMI FL 33015 MIAMI FL 33015					DO NOT WRITE IN THIS SPACE		
US US					3. Date Incorporated or Qualified		
**		•			08/26/1997		
2 Principal P	lace of Business	2a. Mailing Add	fress		4. FEI Number	Applied For	
21 14		26 /4//	I NW 8	3474 Ade	65-0777880	Not Applicable	
Suite, Apt.	# etc	Suite, Apt.			\rightarrow	\$8.75 Additional	
22	r, 010.	27	., •		5. Certificate of Status Desired	Fee Required	
City & Stat	è	City & State	9		6. Election Campaign Financing	\$5.00 May Be	
- 44	ami Florida		in i f	-6-	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip		Country	8. This corporation owes the current year		
24 33/	26 25 USA	29 33/	۲6 ₃₀	Country 51	Intangible Personal Property.	Yes 🗌 No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
81 Name Day					Adrian L. Pere	77.	
PERE	PEREZ, ADRIAN L				81 Name + drian L. Verez 82 Street Address (P.O. Box Number is Not Acceptable) rd 1		
6135 NW 167 ST				62 Street A	H201 S.W. 93 AVENUE		
STE E14				83	110=0		
MIAMI FL 33015					· · · · · · · · · · · · · · · · · · ·		
{				84 City	Davie F	85 Zip Code	
11. Pursuant to the provisions of sections 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 familiar with, and accept the obligations of, section 607.0505, Florida Statutes.							
SIGNATURE							
12.	OFFICERS AN		(NOTE.	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition	
TITLE	PD		DELETÉ	1.1 TITLE	Ph	Change Addition	
NAME	PEREZ, ADRIAN	المسا	JELE I E	1.2 NAME	Perez Adrian	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
STREET ADDRESS	6135 NW 167 ST, STE E14			1.3 STREET ADDRESS	4201 SW. 93rd Avenue	[
	MIAMI FL 33015				Perez, Adrian Avenue 4201 S.W. 93rd Avenue Davie, FL. 33328	2	
CITY-ST-ZIP TITLE	WIAWI FE 33013		NEL ETT	1.4 CITY-ST-ZIP 2.1 TITLE	20(0)(7)	Change Addition	
	}	<u> </u>	DELETE	1		Change Addition {	
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE	İ		DELETE	3.1 TITLE		Change Addition	
NAME	• • • • • • • • • • • • • • • • • • • •		· 	3.2 NAME .			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE			DELETE	4.1 TITLE		Change Addition	

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 oath; that I am an officer or director of the corporation or the receiver or trustee sinpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if granged, or on an attantment with maddress

4.2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.2 NAME

DELETE

DELETE

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP 6.1 TITLE

SIGNATURE: \(\(\)

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

35-470-8977

Change Addition

Change Addition