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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700094800

1. Corporation AD-VAN	TAGENET, INC.	004000			
Principal Place of Business Mailing Address					T I MANISADE ING FARFE FORME CONTR. BRITI DOUGH DOUGH FORES CONTR. DRILL DOUGH FORES
1960 STICKNEY POINT ROAD 1960 STICKNEY POINT ROAD			ND.		
SUITE 210 SUITE 210					
SARASOTA FL 34231 SARASOTA FL 34231					DO NOT WRITE IN THIS SPACE
	_				3. Date Incorporated or Qualifed 11/05/1997
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number
21 26					4. FEI Number / 5 -0 7973/4 Applied For NOT APPLICABLE Not Applicable
Suite, Apt. #, etc. Suite, Apt. #,					5 Cortifeets of Status Desired
27					Fee Required
City & State City & State					6. Election Campaign Financing \$5.00 May Be
23	28				Trust Fund Contribution Added to Fees
Zìp	_ ′	Country Zip Countr			This corporation owes the current year Intangible
24	25 29 30		30		Personal Property Tax. Yes □No
	9. Name and Address of Current	Registered Agent		al si	10. Name and Address of New Registered Agent .
VIII	ARES, RAYMOND M		'	Name	
1960 STICKNEY POINT ROAD				Street	Address (P.O. Box Number is Not Acceptable)
SUITE 210			L		
SARASOTA FL 34231			\{	13	
SANASUTA PL 34231			-	34 City	85 Zip Code
				'	FL T
office or r	egistered agent, or both, in the State om familiar with, and accept the obligati	f Florida. Such change was au ons of, Section 607.0505, Flori	ithorized t ida Statut	by the corpo	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
			13.	gent signature n	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICERS AND	DELETE	1.1 TITU	: 1	Change Addition
	HEAPS, SCOTT A		1.2 NAM		
NAME	1000 CHOUNEY DOINT DD CTE 010				·
STREET ADDRESS	CADACOTA EL 04004		1	ET ADDRESS	
CITY-ST-ZIP	D	☐ DELETE	2.1 TITL	-ST-ZIP	☐ Change ☐ Addition
TITLE	_				·
NAME	4000 CTICKNEY DOINT DD CYT 040		2.2 NAM		
STREET ADDRESS				EÉT ADDRESS	
CITY-ST-ZIP				/-ST-ZIP	Change Addition
TITLE		☐ DELETE	3.1 TITL	- 1	☐ Charige ☐ Addition
NAME			3.2 NAM		
STREET ADDRESS			3.3 STR	EET ADDRESS	
CITY-ST-ZIP				-ST-ZIP	
TITLE		☐ DELETE	4.1 TITL	!	☐ Change ☐ Addition
NAME			4, 2 NAM	Æ j	
STREET ADDRESS			4.3 STR	EET ADDRESS	
CITY-ST-ZIP			_	-ST-ZIP	
			5.1 TITL		☐ Change ☐ Addition
NAME			5.2 NAM	1	
STREET ADDRESS			5.3 STR	ET ADDRESS I	
3111-01-21				-ST-ZIP	
TOLE		[] DELETE	6.1 TITL	E "T	☐ Change ☐ Addition

CITY-ST-ZIP 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 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 attagraph with an address, with all other like empowered.

64 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

NAME OF SIGNING OFFICER OR DIRECTOR

941-927-7674