

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90295 033 ***158.75

DOCUMENT # P98000012093

1. Entity Name

ADVANCED TECHNOLOGY SOLUTIONS, INC.

Principal Place of Business

**5845 HOLLYWOOD BLVD
 STE 202
 HOLLYWOOD FL 33021
 US**

Mailing Address

**7744 PETERS RD
 STE 115
 FORT LAUDERDALE FL 33324
 US**

2. Principal Place of Business

**2450 Hollywood Blvd
 Suite, Apt. #, etc.
 Suite 603**

3. Mailing Address

**2450 HOLLYWOOD BLVD
 Suite, Apt. #, etc.
 Suite 603**

City & State

HOLLYWOOD FL

City & State

HOLLYWOOD FL

4. FEI Number

65-0812682-05-0512052

Applied For

Not Applicable

Zip

33020

Country

Broward

Zip

33020

Country

BROWARD

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SCHENKER, DON
 4333 SW 95 AVE
 DAVIE FL 33328**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **SCHENKER, DON**
 STREET ADDRESS **7744 PETER RD STE 115**
 CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **VP** ☐ Delete
 NAME **WONG, RAUL**
 STREET ADDRESS **7744 PETERS RD STE 115**
 CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **SCHENKER, DON**
 STREET ADDRESS **2450 Hollywood Blvd. Ste. 603**
 CITY-ST-ZIP **Hollywood, FL. 33020**

TITLE **VP** ☒ Change ☐ Addition
 NAME **WONG, RAUL**
 STREET ADDRESS **2450 Hollywood Blvd. Ste. 603**
 CITY-ST-ZIP **Hollywood, FL. 33020**

TITLE **S** ☐ Change ☒ Addition
 NAME **KEVIN WRETZEL**
 STREET ADDRESS **2450 Hollywood Blvd. Ste. 603**
 CITY-ST-ZIP **Hollywood, FL. 33020**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02

Date

954/624-4000

Daytime Phone #

CR2E034 (9/01)