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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

ADVANCED CONCEPTS FINANCIAL, INC

P98000020397

Principal Place of Business WEST PALM BEACH

Mailing Address
11300 U.S. HWY. ONE
SUITE 400
NORTH PALM BEACH, 7L
3.3408

FILED Aug 30, 1999 8:00 am Secretary of State

08-30-1999 90006 041 ***550.00



3. Date Incorporated or Qualifed 3-3-98

DO NOT WRITE IN THIS SPACE

Sulfe, April R. etc. 22 20	2. Principal P	lace of Business	2a. Mailing Ad	dress	_		4. FEI Number 65 - 08 3 / 1 7 3	App	lied For	
Suite, Apt. #, etc. 27 27 27 5. Cartificate of Status Desired \$5.75 Additional Fee Required \$5.00 May 9e Additional \$5.00 May 9e Addi	21	26					65-083/173	Not	Applicable	
City & State City & Country St. Disconnection Contribution Contribution Contribution City		#, etc.					- C	\$8.75 A	dditional	
City & State City & State City & City & State	22		27				5. Certificate of Status Desired	Fee Red	quired	
Zip Country Zip Zib Parsonal Property Tax. Yes Cliff Country Zib Parsonal Property Tax. Yes Cliff Zib		e	City & Sta	ite			6. Election Campaign Financing	\$5.00	May Be	
Zip Country Zip Country 2 Personal Property Tax. Yes Personal Property Tax.	23		28				Trust Fund Contribution	_ Added to	Fees	
9. Name and Address of Curren Registered Agent JIM STELLEL MAY BE NAME JULIER, FL 33 478 81 Name 10. Name and Address of New Registered Agent NAME Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 697 0502 and 697 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar, with, and accept the obligations of Sections 607 0505, Florida Statutes, the above-named 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, the above-named corporation's board of directors. Interety accept the appointment as registered agent. I am familiar, with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE JULIER STREET ADDRESS (NOTE Registered Agent algorithms required when remutating) ATTILE DELETE 1: TITLE JULIER STREET ADDRESS (NOTE Registered Agent algorithms required when remutating) ATTILE CHANGE 1.3 THE TABLE STREET ADDRESS (NOTE REGISTANCE) 1.4 STREET ADDRESS (NOTE REGISTANCE) 1.4 STREET ADDRESS (NOTE REGISTANCE) 1.5 STREET ADDRESS (NOTE RE		Country	+ +	_	Country		8. This corporation owes the current year	Intangible		
9. Name and Address of Current Registered Agent JM STELCE MKH B 81 Name JUN 180 HAYNIC LANG 82 Street Address (P.O. Box Number is Not Acceptable) 38 84 City FL 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. Inventy accept the appointment as registered agent, and are inventionally the corporation's board of directors. Inventy accept the appointment as registered agent, and are inventionally the corporation's board of directors. Inventy accept the appointment as registered agent, and are inventionally agent, and accept the obligations of Section 607.9505, Florida Statutes. SIGNATURE S	24	25 PALL BCL	29	30			Personal Property Tax.	☐ Yes	⊒Kio]	
STREET ADDRESS STRE			1 1				10. Name and Address of New Registers	d Agent		
SUPPLY STREET ADDRESS STREET ADDRE						Name				
SUPPLY SECOND SECTION SECTIO	JIM SIELUEL				92	P2 Street Address (P.O. Boy Number is Not Assestable)				
SURFICIENT FL 33 4 78 84 City FL 85 Zip Code	16780 HAYNIE LITAE HEW!				02	Street Address (P.O. Box Number is Not Acceptable)				
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 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	1/ 22/17/				83	83				
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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. In hereby accept the appointment as registered agent, and familiar,with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE S	<i>ى</i> ر _ا	PILER TO BUT!	O							
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, or main and composed by the provision of 7.0508, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TITLE NAME STREET ADDRESS 13. STREET ADDRESS 14. OTT-ST-ZP 12. TITLE DELETE 11. TITLE DELETE 12. TITLE DELETE 21. TITLE DELETE 31. TITLE DELETE 32. NAME 33. STREET ADDRESS 34. CTY-ST-ZP 34. CTY-ST-ZP TITLE DELETE 41. TITLE DELETE 51. TITLE DELETE 52. TITLE DELETE 53. TITLE DELETE 54. TITLE DELETE 54. TITLE DELETE 54. TITLE DELETE 55.		•			84	City	F	85 Zip C	ode	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. In ereby accept the application of the properties of the prope	11. Durance 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									
SIGNATURE Signature, Sypan or printed rate of reference power and title if applicable. (NOTE: Registered Agent elignature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICERS AND DIRECTORS 14. TITLE 12. NAME 12. NAME 14. STELLEL OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 14. STELLEL OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 14. STELLEL OFFICERS AND DIRECTORS IN 12 OFFICERS AND	I office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered									
12.	econt Least familiar with and accept the obligations of Section 607 0505. Florida Statutes									
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE	SIGNATURE - LIVE BOTTE B									
TITLE	42			(NOTE: Reg		ir siðusirara tadollar		AND DIRECTOR	RS IN 12	
NAME STREET ADDRESS		OFFICERS AND		1 DELETE		1 1	RES			
13 STREET ADDRESS 13 STREET ADDRESS 14 CTY-ST-ZP		1:44 - Surgery	_	, , , , , ,		()	IL STE 1.1.E(_	_	
NAME		JIM SIECULU				16	27 80 HAYNIE LAWE			
NAME	STREET ADDRESS					ADDRESS 1 4	2N. TES 21 33478			
NAME	···			l perete		T-ZIP J.	2011 CO 1 C 337 10	Change	☐ Addition	
DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP	l		L	DELETE		V/	270 20 11 22 NETIN	(A) Change		
DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP	NAME					DA	KONTEK HEICKING PON	277-1		
DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS					ADDRESS / 7	O CELESTATE WAY, COOL	1		
NAME				200,000		T-ZIP	NO BEACH, TO 33408	Change	☐ Addition	
STREET ADDRESS	TITLE			J DELETE	3.1 TITLE			Change	☐ Addition	
CITY-ST-ZIP	NAME									
TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME	STREET ADDRESS		•		3.3 STREET	ADDRESS				
NAME STREET ADDRESS CITY- ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS	CITY-ST-ZIP				3.4. CITY-5	T-ZIP		E101	D Addiso-	
STREET ADDRESS	TITLE] DELETE	4.1 TITLE			☐ Change	Addition	
CITY-ST-ZIP	NAME			I.	4. 2 NAME	ļ			ļ	
TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.2 NAME STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME CSTREET ADDRESS G.3 STREET ADDRESS STREET ADDRESS	STREET ADDRESS			Į.	4,3 STREE	ADORESS			İ	
TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS STREET ADDRESS	CITY-ST-ZIP				4.4 CITY-S	T-ZIP				
5.3 STREET ADDRESS) DELETE	5.1 TITLE			Change	☐ Addition	
5.4 CITY-ST-ZIP	NAME	ĺ		1	5.2 NAME				j	
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS	STREET ADDRESS	}			5.3 STREET	T ADDRESS				
TITLE G.1 TITLE G.2 NAME NAME STREET ADDRESS 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	1)		1	5.4 CITY-S	T-ZIP				
NAME STREET ADDRESS 6.2 NAME 6.3 STREET ADDRESS				DELETE	6.1 TITLE			☐ Change	☐ Addition	
STREET ADDRESS 6.3 STREET ADDRESS					6.2 NAME					
				Į.	6.3 STREET	ADDRESS			į	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	ĺ			1	6.4 CITY-S	T-ZJP			-	

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 attachment with an address, with all other like empowered.