

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000102359

FILED  
Jan 03, 2003  
Secretary of State

**Entity Name:** ADVANCED COMPONENTS SOLUTIONS, INC.

**Current Principal Place of Business:**

5201 RIO VISTA AVE., BLDG. 14  
TAMPA, FL 33634

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 23032  
TAMPA, FL 33623

**New Mailing Address:**

**FEI Number:** 59-3544479

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCINTYRE, RICHARD J ESQ  
2700 BARNETT PLAZA  
1001 EAST KENNEDY BLVD.  
TAMPA, FL 33601 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: LEVENSON, ERIC D  
Address: 22652 LAURELDALE DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: DST ( ) Delete  
Name: LEVENSON, RENA  
Address: 14502 THORNFIELD CT  
City-St-Zip: TAMPA, FL 33624

Title: DV ( ) Delete  
Name: PRITCHARD, RALPH  
Address: 9708 PLEASANT RUN WAY  
City-St-Zip: TAMPA, FL 33647

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC LEVENSON

DP

01/03/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date