## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P99000017608 **DOCUMENT #**

1. Entity Name

ADVANCED SERVICES INTERNATIONAL, INC.



**FILED** Feb 27, 2003 8:00 am Secretary of State 02-27-2003 90109 023 \*\*\*150.00

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| Principal Place of Business 5350 NORTHWEST 104TH COURT MIAMI FL 33178   |   | Mailing Address<br>5350 NORTHWEST 104TH COURT<br>MIAMI FL 33178 |                   |                     | 1                                     | IIIAAN ING ARUA TAIN ADNI ARUI                      | <b>70</b> 110 <b>11</b> 100 111   | <b>a</b> ll a <b>s</b> ata ale | !!! <b>40</b> ) <b>0</b> 1 ( <b>2</b> 17 1 <b>0</b> 17 |  |
|---|---|---|-------------------|---------------------|---------------------------------------|---|-----------------------------------|--------------------------------|--|--|
| 2. Principal  | Place of Business   | 3. Mailing Address  |                   |                     |                                       |   |                                   |                                |  |  |
| Suite, Ap   | ot. #, etc.   | Suite, Apt. #, etc.   |                   |                     | CHECK HERE IF MAKING CHANGES          |   |                                   |                                |  |  |
| City & St   | ate   | City & State  |                   |                     | 4. FEI Number 65-0900433 Applied For  |   |                                   |                                |  |  |
| Zip   | Country   | Zip   | Country           | y                   | 5. Certific                           | ate of Status Desired                               | Not Applicable  \$8.75 Additional |                                |  |  |
|   | 6. Name and Address of Current  | Registered Agent  |                   |                     |                                       | and Address of New Re                               |                                   | ee Requi                       | ired   |  |
| ***************************************   |   |   | <del></del>       | Name                | , r. name c                           | ING Address of New Re                               | Jistered A                        | gent                           | -  |  |
|   | & UTRERA, P.A.  |   | <u> </u>          | Stroot Addro        | s (P.O. Box Number is Not Acceptable) |   |                                   |                                |  |  |
|   | ERIA AVENUE   |   |                   | Street Addre        | ess (P.O. Box Nun                     | nber is Not Acceptable)                             |                                   |                                |  |  |
| COHAL G   | GABLES FL 33134   |   | [                 |                     |                                       | <del></del>   |                                   | <u> </u>                       |  |  |
|   |   |   |                   | City                |                                       | 16  | FL                                | Zip Co                         |  |  |
| 8. The above the obligations in | e named entity submits this statement fo<br>ations of registered agent. | r the purpose of changing                                       | its registered    | office or regi      | stered agent, or l                    | both, in the State of Florid                        | ia. I am fa                       | <u>l</u><br>miliar with        | n, and accept  |  |
| <u>.</u>  | and the distriction agent.  |   |                   |                     |                                       |   |                                   |                                | ·  |  |
| SIGNATURE   | Signature, typed or printed name of registered agent                    | and title if configuration                                      | OTE D             | <del></del>         | <u> </u>                              |   |                                   |                                |  |  |
|   |   | and one ii applicable. (No                                      | OTE: Registered A | gent signature requ | uired when reinstating)               |   | DATE                              |                                |  |  |
| Afte  | FILE NOW!!! FEE IS \$150.00<br>or May 1, 2003 Fee will be \$550.00      |   |                   |                     |                                       | Election Campaign Finar<br>Trust Fund Contribution. |                                   |                                | <b>00</b> May Be                                       |  |
|   | k Payable to Florida Department of                                      | 1   |                   |                     |                                       | must Fund Contribution.                             |                                   | Adde                           | ed to Fees   |  |
| TITLE   | OFFICERS AND  |   | 11.               |                     | ADDITION                              | S/CHANGES TO OFFICE                                 | ERS AND [                         | IRECTO                         | RS IN 11   |  |
| NAME  | SAMANIEGO, JUAN B   | ☐ Delete  | TITLE<br>NAME     |                     |                                       |   | ŧ                                 | ☐ Change                       | ☐ Addition   |  |
| STREET ADDRESS  | 5350 NORTHWEST 104TH COUR   |   |                   | ADDRESS             |                                       |   |                                   |                                |  |  |
| CITY-ST-ZIP   | MIAMI FL 33178  |   | CITY-ST-          |                     |                                       |   |                                   |                                |  |  |
| TITLE   | VD  | ☐ Delete  | TITLE             |                     |                                       | <u> </u>  |                                   | Change                         | Addition   |  |
| NAME  | BOCARANDA, ARMANDO  |   | NAME              |                     |                                       |   | L                                 | Change                         | Addition   |  |
| STREET ADDRESS<br>CITY-ST-ZIP   | 5350 NW 104 COURT<br>MIAMI FL 33178                                     |   | STREET A          |                     |                                       |   |                                   |                                |  |  |
| TITLE   | T 331/6   |   | CITY-ST-          | ZIP                 |                                       |   |                                   |                                |  |  |
| NAME  | CHACON, PAUL  | 🔀 Delete  | TITLE             |                     |                                       |   |                                   | Change                         | ☐ Addition   |  |
| STREET ADDRESS  | 7823 LOCHNESS DR  | ستهمي الجاهم الجاجا   | NAMÉ<br>STREET AI | DDRESS -            |                                       |   |                                   |                                |  |  |
| CITY-ST-ZIP   | MIAMI LAKES FL 33014  |   | CITY-ST-          |                     |                                       | · · · -   |                                   |                                | -  |  |
| TITLE   |   | ☐ Delete  | TITLE             | •                   |                                       |   | <del></del>                       | 7.05                           |  |  |
| NAME  |   | — - <b>*****</b>  | NAME              |                     |                                       |   | L                                 | _ Change                       | Addition   |  |
| STREET ADDRESS<br>CITY-ST-ZIP   |   |   | STREET AL         | ODRESS              |                                       |   |                                   |                                |  |  |
|   |   |   | CITY-ST-          | ZIP                 |                                       |   |                                   |                                |  |  |
| TITLE<br>NAME .   |   | ☐ Delete  | TITLE             |                     |                                       |   |                                   | Change                         | ☐ Addition   |  |
| STREET ADDRESS  |   | •   | NAME<br>STREET AN | DRECC               |                                       |   |                                   |                                |  |  |
| CITY-ST-ZIP   |   |   | STREET AD         |                     |                                       |   |                                   |                                |  |  |
| TITLE   |   | ☐ Delete  | TITLE             | <del>-  -</del>     |                                       |   |                                   |                                |  |  |
| NAME  |   | - Delete  | NAME              |                     |                                       |   | L                                 | ] Change                       | ☐ Addition   |  |
| STREET ADDRESS  |   | ٠,  | STREET AD         | DRESS               |                                       |   |                                   |                                |  |  |
| CITY-ST-ZIP   |   |   | CITY-ST-Z         | ZIP                 |                                       |   |                                   |                                | 1  |  |

12. I hereby certify that the information supplied with this filling 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## Attachment 90.036977 HP99000017608

Miramar, Florida February 16, 2003

Juan B. Samaniego – President / Director Armando Bocaranda - Vice President / Director Advanced Services International, Inc. 5350 NW 104 Court Miami, FL 33178

Dear Mr. Samaniego / Bocaranda:

This letter is to inform you of my resignation as an officer (Treasurer) of Advanced Services International, Inc. effective as of February 28, 2003. The reasons for my resignation are that after our conversations of October 8, 2002 with both of you and October 10 and 12 of 2002 and December 2002 with Juan Samaniego, and subsequent events that showed no change in the company's policies I cannot continue as part of the corporation.

Sincerely,

Raul J. Chacon 13142 SW 28 Street Miramar, FL 33027