2006 FOR PROFIT CORPORATION

TITLE NAME STREET ADDRESS CRY-SY-ZIP TRLE NAME STREET ADDRESS CITY-ST-ZIP

FILED **ANNUAL REPORT** Jan 10, 2006 08:00 AM Secretary of State DOCUMENT # P99000022234 1. Entity Name ADVANCED EQUIPMENT SOUTH, INC. Mailing Address Principal Place of Business 5475 WILLIAMSBURG DR 5475 WILLIAMSBURG DR UNIT #3 UNIT #3 PUNTA GORDA, FL 33982 PUNTA GORDA, FL 33982 01052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0910375 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GERBER, HANS DO NOT WRITE 5475 WILLIAMSBURG DR UNIT#3 IN THIS SPACE PUNTA GORDA, FL 33982 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agont signature required whon reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE WENGER, HANS NAME 2313 DEBORAH DR STREET ADDRESS CITY-ST-ZIP PUNTA GORDA, FL 33950 U00000381445 01/11/06-80053-023 150.00 TITLE GERBER, HANS NAME STREET ADDRESS 2142 CHARLOTTE AMALIE CT CITY-ST-ZIP PUNTA GORDA, FL 33950 TITLE FAVRE, JEAN-DANIEL NAME STREET ADDRESS 8750 MIDNIGHT PASS RD #403C DO NOT WRITE CITY-ST-ZIP SARASOTA, FL 34242 TITLE IN THIS SPACE MAME STREET ADORESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 it 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 10 or Block 11 if changed, or on an attachment with an ad

NAME OF SIGNING OFFICER OR DIRECTOR