2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000033218

Entity Name: ADVANCED SOFTWARE TECHNOLOGIES INCORPORATED

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 770341 768 RIVERSIDE DRIVE CORAL SPRINGS, FL 33077

#102

CORAL SPRINGS, FL 33071

Current Mailing Address: New Mailing Address:

768 RIVERSIDE DRIVE P. O. BOX 770341 CORAL SPRINGS, FL 33077

#102

CORAL SPRINGS, FL 33071

FEI Number: 65-0910181 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BATTISTE, GERALD G BATTISTE, GERALD G P.O. BOX 770341 768 RIVERSIDE DRIVE

CORAL SPRINGS, FL 33077 US CORAL SPRINGS, FL 33071 US

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: GERALD G. BATTISTE 04/25/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete BATTISTE, GERALD G JR Name: P.O. BOX 770341 Address:

City-St-Zip: CORAL SPRINGS, FL 33077

Title: () Delete Name: BATTISTE, IDALIA

P.O. BOX 770341 Address: CORAL SPRINGS, FL 33077 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: (X) Change () Addition BATTISTE, GERALD G JR Name: 768 RIVERSIDE DRIVE, #102 Address:

CORAL SPRINGS, FL 33071

Name: BATTISTE, IDALIA

City-St-Zip:

Title:

Address: 768 RIVERSIDE DRIVE, #102 CORAL SPRINGS, FL 33071 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: IDALIA BATTISTE 0 04/25/2005