2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900094134  1. Entity Name  ADVG, INC.					Secretary of State 04-11-2002 90707 031 ***158.75			
Principal Place 2395 SOUTH V TITUSVILLE, FL	AVENUE SUITE 1							
2. Principal P 2395 Suite, Apt.	Washington							
City & State  City & State			e, FL	-	59-3603850	——————————————————————————————————————	oplied For ot Applicable	
327	80 USA -	24180	USA	<u></u>	Certificate of Status Desired	<ul> <li>Fee Require</li> </ul>		
	6. Name and Address of Current Re	gistered Agent	Name	<u>7. N</u>	Name and Address of New Register	ad Agent		
EMERY, RI 2412 DEVO	Street Address	Street Address (P.O. Box Number is Not Acceptable)						
TITUSVILLE FL 32780			City			Zip Code	e	
	named entity submits this statement for the		<u></u>			<u>-F</u> ] '		
Tax filing r	Signature, typed or printed name of registered agent and oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! After May 1, 2002	Registered Agent signature requirements FEE IS \$150.00 2 Fee will be \$550.00 2 to Department of S	)	10. Election Campaign Financing Trust Fund Contribution.	\$5.0	0 May Be	
11.	OFFICERS AND DII	RECTORS	12.	AD	I DITIONS/CHANGES TO OFFICERS A	AND DIRECTORS	S IN 11	
NAME	PST EMERY, REBECCA S 2412 DEVONSWOOD ROAD TITUSVILLE FL 32780	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	portify that the information curvation with this	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	0		Change	☐ Addition	

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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

IGNATURE:

| SIGNATURE | SIGNATURE | OWNER | 3/18/02 321-264-260 |
| SIGNATURE | Date | Dayline Phone #

SIGNATURE: