


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 27, 2003 8:00 am
Secretary of State

05-27-2003 90175 050 ***150.00

DOCUMENT # <u>P99000094134</u>	
1. Entity Name <u>ADVG, INC.</u>	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>216 Flagler Ave</u>	3. Mailing Address <u>P.O. Box 1059</u>
Suite, Apt. #, etc. <u>New Smyrna Beach</u>	Suite, Apt. #, etc.
City, State <u>FLorida</u>	City, State <u>Titusville FL</u>
Country <u>USA</u>	Country
Zip <u>32169</u>	Zip <u>32781</u>

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number <u>39-3603850</u>		Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name <u>Rebecca S. Emery</u>		
	Street Address (P.O. Box Number is Not Acceptable) <u>2412 Devonswood Rd</u>		
	City <u>Titusville</u>	State <u>FL</u>	Zip Code <u>32780</u>

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 Rebecca S. Emery DATE 5/10/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing.)

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PST</u> <u>Rebecca S. Emery</u> <u>2412 Devonswood Rd</u> <u>Titusville, FL 32780</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Rebecca S. Emery President 5/10/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

Attachment #

80122251

p99000094134

ADVG, Inc.
Rebecca S. Emery
P.O. Box 1059
Titusville, FL 32781-1059

May 10, 2003

Dept. of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

To Whom It May Concern:

Enclosed is my check to renew my ADVG, Inc. Corporation Fee. I did not receive my renewal, so I pulled up the form on your Web site. FEI# 59-3603850

Thank you,

Rebecca S. Emery

Rebecca Emery, President