2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000098863

GORDON, WHITEHEAD

PEMBROKE PINES, FL 330242

2241 NW 82 AVE

Name:

Address:

City-St-Zip:

FILED Jan 26, 2009 Secretary of State

Entity Na	me: ADVANO	CED WORK VAN INTERIOR	S, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
3160 SE G STUART,	RAN PKWY FL 34997						
Current Mailing Address:			New Maili	New Mailing Address:			
3160 SE G STUART,	RAN PKWY FL 34997						
FEI Number	: 65-0963895	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired	d()	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
2992 S. W	ARTHUR A '. SUNSET TR Y, FL 34990	ACE CIRCLE US					
	named entity e of Florida.	submits this statement for th	e purpose of changing	ts registered	office or registered agent, o	or both,	
SIGNATU	RE:						
	Electro	nic Signature of Registered A	Agent -		Date		
Election Ca	mpaign Financir	ng Trust Fund Contribution ().					
OFFICER	S AND DIREC	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BROOKS, AR	JNSET TRACE CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DUCOMB, JER 30153 BRISTO		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	BROOKS, MA	NSET TRACE CIRCLE	Title: Name: Address: City-St-Zip:	BROOKS, MA	INSET TRACE CIRCLE		
Title:	D () Delete	Title:	VSD (X) Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: ARTHUR A. BROOKS PT 01/26/2009

YOUNGBLOOD, CHRISTINA T V

PALM BEACH GARDENS, FL 33418

415 4TH TERRACE