

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S01684

FILED
Jan 27, 2005
Secretary of State

Entity Name: ADVANCED TECHNICAL SALES, INC.

Current Principal Place of Business:

641 NE 26TH COURT
POMPAN0 BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

641 NE 26TH COURT
POMPAN0 BEACH, FL 33064 US

New Mailing Address:

FEI Number: 65-0219993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALEY, MATTHEW
65 SE 5TH AVENUE
UNIT T
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALEY, MATTHEW M.
Address: 65 SE 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

Title: S () Delete
Name: HALEY, MATTHEW IV
Address: 2811 NE 52ND CT
City-St-Zip: LIGHTHOUSE PT, FL 33064

Title: VP () Delete
Name: HALEY, TIMOTHY J.
Address: 33646 ST FLANCIS DR
City-St-Zip: AVON, OH 44011

Title: VP () Delete
Name: HOLTSMANN, DONALD F.
Address: 840 SE 15TH AVENUE
City-St-Zip: DEERFIELD BEACH, FL

Title: T () Delete
Name: LAMBERT, ROSEMARY
Address: 29131 SHENANDOAH
City-St-Zip: FARMINGTON HILLS, MI

Title: VP () Delete
Name: HALEY, DEBRA
Address: 2811 NE 52ND CT
City-St-Zip: LIGHTHOUSE PT, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MATTHEW HALEY

P

01/27/2005

Electronic Signature of Signing Officer or Director

Date