PROFIT CORPORATION

1. Corporation Name

STREET ADDRESS

DOCUMENT # **S04593**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

ANNUAL REPORT 1999

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90109 016 ***158.75

ADVANC	ed technology develo	PMENT, INC.								
Principal Place	of Business	Mailing Address					1 (20)/5/5 (1) 20/// 2/2/ 2/10/0	188 1111 B1811 1		4:4:: 4:4:: :aa.
1810 NW 23RD BLVD SUITE 251 GAINESVILLE FL 32605 1810 NW 23RD BLVD SUITE 251 GAINESVILLE FL 32605 GAINESVILLE FL 32605							DO NOT WRITE IN THIS SPACE			
US US							3. Date Incorporated or Qualifed 10/01/1990			
2 Dringing D	lana of Business	2a. Mailing Address					4. FEI Number			Applied For
¬ · ///····							59-3031594			Not Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.							5 Additional
22	n, 0.0.	27					5. Certificate of Status Desired	X	•	سيانيا Required
City & State	e	City & State			_		6. Election Campaign Financing		\$5.0	May Be
23		28					Trust Fund Contribution			ed to Fees
Zip	Country	Zip	Cou	intry			8. This corporation owes the curr	ent year in	tangible	
24	25	29	30				Personal Property Tax.		☐ Yes	Mo
	9. Name and Address of Current	Registered Agent					10. Name and Address of New F	Registered	Agent	
	ELBAUM, JACOB G			81	Name					
			82 Street Addre			(P.O. Box Number is Not Accepta	able)			
1810 NW 23RO BLVD				July Street Additi						
	E 251			83						
GAINESVILLE FL 32605				84	City				85 Z	ip Code
								FL	-	·
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered egent	of Florida, Such change was a ions of, Section 607.0505, Flo	nutnorizeo orida Stat	utes.	the corpor	rauon s	s position directors. Thereby acception	DATE	munem as	
12.	OFFICERS ANI	D DIRECTORS	13.				ADDITIONS/CHANGES TO OF	FICERS A		
TITLE	DPC	☐ DELETE	1.1 Π	TLE					☐ Chang	ge Addition
NAME	APPELBAUM, JACOB G.		1.2 N	AME						
STREET ADDRESS	1810 NW 23RD BLVD SUITE 25	i 1	1.3 S	TREET	ADDRESS					
CITY-ST-ZIP	GAINESVILLE FL	_	1.4 C	ηγ-S	T-ZIP					
TITLE		☐ DELETE	2.1 ΤΙ	πLE	ļ				Chang	ge 🗀 Addition
NAME			2.2 N	AME						
STREET ADDRESS			2.3 S	TREET	TADORESS					
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NAME			3.2 N	AME						
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NAME					TADDOCCO					
STREET ADDRESS			1		T ADDRESS					
CITY-ST-ZIP		The section of the se	5.4 C	my-S	I-ZIP				Chang	ge Addition
TITLE		☐ DEŁETE	0.110 ROM		Į					a manual

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

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6.3 STREET ADDRESS

SIGNATURE: 4