2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S66426 **DOCUMENT#** ADVANCED ALUMINUM, INCORPORATED



FILED Jan 09, 2003 8:00 am Secretary of State 01-09-2003 90135 015 ***150.00

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Principal Place of Business 1580 MARKET CIRCLE #1 PORT CHARLOTTE FL 33953		Mailing Address 1580 MARKET CIRCLE #1 PORT CHARLOTTE FL 33953				JPRIN BAJO BOĐO D	1811 8 :817 8 18	ki Bibii Bibis 1801
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2. Principal	Place of Business	3. Mailing Address				11618	ION ON A TH	
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE	E IF MAKING	CHANGE	ES
City & Sta	ate	City & State			4. FEI Number 65-0277439	 9	-	Applied For
Zip	Country	Zip	Country		Certificate of Status Desired		\$8.75 A	Not Applicabl
	6. Name and Address of Curre	nt Registered Agent				_	Fee Requi	ired
			Name		7. Name and Address of New I	Registered A	\gent	
WALTER	S, WALTER A., JR.		ļ					
2560 BRI			Street	Address (P.	O. Box Number is Not Acceptable	e)		
ENGLEW	OOD FL 34223				······································			
			City	.		-		
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the obliga	e named entity submits this statement tions of registered agent.	for the purpose of changing i	ts registered office of	or registered	d agent, or both, in the State of Flo	orida. I am fa	amiliar with	n, and accept
	- 0							
SIGNATURE								
_	Signature, typed or printed name of registered age	nt and title if applicable. (NC	TF: Registered Agent signs	tura required ut	Ann 12: 1-4: 13			
· · · · · · · · · · · · · · · · · · ·	Signature, typed or printed name of registered age	ent and title if applicable. (NC	TE: Registered Agent signa	ature required wh	then reinstating)	DATE		
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my signature shall have the same legal effect as if made under oath; that I am an officer or director my signature by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trustee empowered to execute this rechanged, or on an attachment with an address with all other like empower.

SIGNATURE:

WALTER A. WALTERS JR