

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006278

Entity Name: ADVANCED AMERICAN TELEPHONES, INC.**Current Principal Place of Business:**9590 SW GEMINI DRIVE
BEAVERTON, OR 97008**Current Mailing Address:**9590 SW GEMINI DRIVE
BEAVERTON, OR 97008**FEI Number:** 93-1008229**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title	PRESIDENT
Name	LEVENSON, ERNEST
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Title	SVP
Name	RAMAGE, MATT
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Title	DIRECTOR
Name	YU WAI, CHANG
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Title	DIRECTOR
Name	KA HUNG, SHEREEN TONG
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Title	SECRETARY, TREASURER
Name	SCHOUTEN , GERRIT
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Title	DIRECTOR
Name	CHI YUN , ALLAN WONG
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Title	DIRECTOR
Name	CHI HOI, TONG
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Title	DIRECTOR
Name	HON KWONG, ANDY LEUNG
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: GERRIT SCHOUTEN**TREASURER &
SECRETARY****04/22/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	KING FAI, PANG
Address	9590 SW GEMINI DRIVE
City-State-Zip:	BEAVERTON OR 97008