



2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90031 047 ***158.75

DOCUMENT # L48014 1. Entity Name ADVANCED PAYLESS COMMUNICATIONS CORP.																											
Principal Place of Business 1120 VIRGINIA AVE. PALM HARBOR FL 34683 US		Mailing Address 1120 VIRGINIA AVE. PALM HARBOR FL 34683 US																									
2. Principal Place of Business <i>90 S. Highland Ave</i> Suite, Apt. #, etc. <i>#1107</i>		3. Mailing Address <i>1324 Seven Springs Blvd</i> Suite, Apt. #, etc. <i>#307</i>																									
City & State <i>Tarpon Springs Fla</i> Zip <i>34689</i> Country <i>USA</i>		City & State <i>New Port Richey FL</i> Zip <i>34655</i> Country <i>USA</i>																									
																											
		MOORE CR2E034 (11/03)																									
4. FEI Number 59-2996843		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent BRESLIN, RICHARD 1120 VIRGINIA AVE. PALM HARBOR FL 34683		7. Name and Address of New Registered Agent Name <i>Richard Breslin</i> Street Address (P.O. Box Number is Not Acceptable) <i>90 S. Highland Ave #1107</i> City <i>Tarpon Springs FL</i> Zip <i>34689</i>																									
8. 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. I am familiar with, and accept the obligations of registered agent.																											
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																									
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other officers empowered.

SIGNATURE: *[Signature]* **3-16-04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #