

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90063 007 ***158.75

DOCUMENT # P99000018308

1. Entity Name

ADVENTUROUS SOLUTIONS INCORPORATED

Principal Place of Business

Mailing Address

6012 NASCI DRIVE NORTHEAST
 ALBUQUERQUE NM 87111

6012 NASCI DRIVE NORTHEAST
 ALBUQUERQUE NM 33772-3224

2. Principal Place of Business

12400 - 91st AVE N

3. Mailing Address

12400 - 91st AVE N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SEMINOLE, FL

City & State

SEMINOLE, FL

4. FEI Number

85-0459349

Applied For

Not Applicable

Zip

33772

Country

USA

Zip

33772

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525

Name

DANIEL G. LANDRY

Street Address (P.O. Box Number is Not Acceptable)

12400 - 91st AVE N.

City

SEMINOLE

FL

Zip Code

33772

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.

SIGNATURE

DANIEL G. LANDRY

Signature, typed or printed name of registered agent and title if applicable.

Daniel G. Landry

(NOTE: Registered Agent signature required when reinstating)

4-6-2000

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **D**
LANDRY, DANIEL G
 STREET ADDRESS **6012 NASCI DRIVE NORTHEAST**
 CITY-ST-ZIP **ALBUQUERQUE NM 87111**

TITLE Change Addition
 NAME **P**
DANIEL G. LANDRY
 STREET ADDRESS **12400 - 91st AVE. N.**
 CITY-ST-ZIP **SEMINOLE, FL 33772**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daniel G. Landry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL G. LANDRY

Date

4-6-2000

Daytime Phone #

727-798-0844

CR2E034 (9/99)