

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 20 PM 1:53

DOCUMENT # **G27629** (6)
1. Corporation Name
AVANTI REALTY, INC.

Principal Place of Business Mailing Address
% TISEO, ALEX **20101 PEACHLAND BLVD**
20101 PEACHLAND BLVD. #208 **UNIT 208**
PORT CHARLOTTE FL 33952 **PT CHARLOTTE FL 33952**
US **US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **03/14/1983** 3a. Date of Last Report **05/01/1994**
4. FEI Number **59-2272935** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 State, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
TISEO, ALEX
775 TAMiami TRAIL
PT. CHARLOTTE FL 33952

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable) **20101 PEACHLAND BLVD UNIT 208**
83
84 City **PORT CHARLOTTE** FL 85 Zip Code **33952**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title of association

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS
TITLE PD
NAME TISEO, ALEX
STREET ADDRESS 779 TAMiami TR.
CITY-ST-ZIP PT. CHARLOTTE FL
TITLE SVT
NAME RAFFAN, NANCY
STREET ADDRESS 779 TAMiami TR.
CITY-ST-ZIP PT. CHARLOTTE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
12 NAME
13 STREET ADDRESS **20101 PEACHLAND BLVD UNIT 208**
14 CITY-ST-ZIP **PT. CHARLOTTE FL. 33952**
2.1 TITLE Change Addition
22 NAME
2.3 STREET ADDRESS **20101 PEACHLAND BLVD UNIT 208**
24 CITY-ST-ZIP **PT CHARLOTTE FL. 33952**
3.1 TITLE Change Addition
32 NAME
3.3 STREET ADDRESS
34 CITY-ST-ZIP
4.1 TITLE Change Addition
47 NAME
4.3 STREET ADDRESS
44 CITY-ST-ZIP
5.1 TITLE Change Addition
52 NAME
5.3 STREET ADDRESS
54 CITY-ST-ZIP
6.1 TITLE Change Addition
62 NAME
6.3 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Nancy Raffan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NANCY RAFFAN

1/12/95

813.60298527