## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-2IP

SIGNATURE:

## Mar 06, 2006 08:00 AM Secretary of State DOCUMENT # L94999 AVANTI PUBLISHING COMPANY Principal Place of Business Mailing Address 2105 NW 102 AVE 2105 NW 102 AVE MIAMI, FL 33172 MIAMI, FL 33172 CR2E034 (11/05) 03022006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0216913 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BRUNJES, ROBERT, F DO NOT WRITE 2105 NW 102 AVE MIAMI, FL 33172 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE BRUNJES, ROBERT, F MAME STREET ADDRESS 10751 SW 27 ST CITY-ST-ZIP DAVIE, FL TYTI F BOHORQUES, JOSE, A NAME STREET ADDRESS 9385 SW 21 ST CITY-ST-ZIP MIAMI, FL 03/16/06-00021-024 158.75 TITLE GELFAND, ARTHUR NAME STREET ADDRESS ONE EXECUTIVE DR #151 DO NOT WRITE CITY-ST-ZIP SOMERSET, NJ 08873 TITLE IN THIS SPACE ROMERO, ORLANDO STREET ADDRESS 2105 NW 102 AVE City-st-zip MIAMI, FL 33172 DILE NASAF STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Floride Statutes. I further certify that the information indicated on this report or supplemental report is the and accurate and that my signature shall have the same legal effect as if made under cath; 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 all other time empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**