


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P01000108130 1. Entity Name AVANTI PROJECTS INC. |  |
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| Principal Place of Business 3052 UNIVERSITY PARKWAY SARASOTA, FL 34243 | Mailing Address 3052 UNIVERSITY PARKWAY SARASOTA, FL 34243 |
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DO NOT WRITE IN THIS SPACE



04132004 No Chg-P CR2E034 (10/03)

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|---|-------------------------------|
| 4. FEI Number 65-1153028 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent MACINTER CORPORATION 5440 NORTH STATE RD 7 SUITE 218 FORT LAUDERDALE, FL 33319 | DO NOT WRITE IN THIS SPACE |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | U000000114264 04/15/04-80043-015 150.00 |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD CURCI, JUAN CARLOS 3052 UNIVERSITY PARKWAY SARASOTA, FL 34243 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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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)(f), 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 like empowered.

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|---|---------------------|--------------------------------|
| SIGNATURE: _____ | 04-13-04 | 94135113 PP |
| <small>SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <small>Date</small> | <small>Daytime Phone #</small> |