## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000030109 (0)

AVANTI OF THE PALM BEACHES, INC.

**FILED** Jan 23 1998 8:00am Secretary of State



Principal Place	Maiting Address					1 I I I I I I I I I I I I I I I I I I I	r commune ein immer der in oder der in der i				
121 CENTER	121 CENTER STREET										
JUPITER FL 33458-4312			JUPITER FL 33458-4312					DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified					
2. Principal Place of Business 2a. Mailing Address								04/20/1994 4. FEI Number	1 1/2	Applied For	
21	26					65-0485118	<del></del>	Not Applicable			
Sulte, Apt.	Suite, Apt. #, etc.							Additional			
22			27					5. Certificate of Status Desired		Required	
City & State			City & State					6. Election Campaign Financing	\$5.0	0 May Be	
23			28					Trust Fund Contribution		to Fees	
Zip	1	Country	Zip			ountry	/	8. This corporation owes or has paid the	current year I	ntangible	
24	. [	25	29		30			Personal Property Tax due June 30.	Yes	Nο	
	9. Name	and Address of Current	Registere	d Agent			<b>,</b>	10. Name and Address of New Register	d Agent		
RIE	NZO, CHAI	RLES				81	Nam	me			
18549 LAKESIDE GARDENS DRIVE				<del> </del> -			82 Street Address (P.O. Box Number is Not Acceptable)				
JUF				"-	0,,,,	to the transfer of the transfer of the transfer of					
<b>55</b> ,				83			···				
						84	City		Toe Zie	Code	
						**	City	· F	L 85 Zip	Code	
11, Pursuant t	to the provisi	ons of Sections 607.0502	and 607.1	508, Florida S	tatutes, the	above	e-name	and corporation submits this statement for the nurnos	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 table if applicable (NOTE Registered Agent signature required when reinstating)  DATE											
12. OFFICERS AND DIRECTORS							Bill Bigital	ADDITIONS/CHANGES TO OFFICERS A		DRS IN 12	
TITLE	DPST	0111021101110	21.720.07	DELETE		TITLE		Nobilitation in the control of the c	Change	Addition	
NAME		CHARLES		_	-	NAME			_ •	[:	
	TREET ADDRESS 18549 LAKESIDE GARDENS DR			· · · · · · · · · · · · · · · · · · ·			ADDRES	22			
1	CITY-ST-ZIP JUPITER FL 33458-3311			1.4 C							
TITLE	AAL III CII	1 2 00 100 0011		DELETE		TITLE	, <u>.</u>	· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition	
NAME				_	4	NAME					
STREET ADDRESS					•		ADDRES	22			
CITY-ST-ZIP						CITY-S					
TITLE				DELETE		TITLE	31-211		Change	Addition	
NAME						NAME			_ •		
STREET ADDRESS							ADDRES	es			
CITY-ST-ZIP	-					CITY-S					
TITLE				DELETE		TITLE	U1 EII		Change	Addition	
NAME						2 NAME					
STREET ADDRESS					•		ADDRES	22			
CITY-ST-ZIP						CITY-S				1	
TITLE	<del></del>			☐ DELET <b>E</b>		TITLE	21 - 211		Change	☐ Addition	
NAME						NAME					
STREET ADDRESS							ADDRES	ec			
***************************************								33			
CITY-ST-ZIP				☐ DELET <b>E</b>		CITY - S	21-11		Change	Addition	
TITLE				ب مندراد					□ Auguße		
NAME						NAME	40000				
STREET ADDRESS							ADDRES	55			
CITY+ST-ZIP					6.4	CITY-S	ST-71P				

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.