

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K98784

**Entity Name:** AVCORE, INC.

**Current Principal Place of Business:**

2011 S. PERIMETER ROAD  
SUITE F  
FT. LAUDERDALE, FL 33309

**Current Mailing Address:**

2011 S. PERIMETER ROAD  
SUITE F  
FT. LAUDERDALE, FL 33309 US

**FEI Number:** 65-0132670

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HARDIN, DAVID C  
100 N.E. THIRD AVENUE  
SUITE 1000  
FORT LAUDERDALE, FL 33301 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DPS  
Name           BAUR, THOMAS  
Address        2011 S. PERIMETER ROAD  
                  SUITE F  
City-State-Zip: FT. LAUDERDALE FL 33309

Title           DVP  
Name           BAUR, CINDY  
Address        2011 S. PERIMETER ROAD  
                  SUITE F  
City-State-Zip: FT. LAUDERDALE FL 33309

Title           D  
Name           MILLER, JOSEPH  
Address        2011 S. PERIMETER ROAD  
City-State-Zip: FT. LAUDERDALE FL 33309

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS BAUR

DPS

02/26/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date