

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000044892

**Entity Name:** AVANTI CLINIC CORP

**Current Principal Place of Business:**

7350 FUTURES DRIVE  
STE 11  
ORLANDO, FL 32819

**FILED**  
**May 01, 2024**  
**Secretary of State**  
**0578686468CC**

**Current Mailing Address:**

10564 BASTILLE LANE  
303  
ORLANDO, FL 32836 US

**FEI Number:** 93-2410979

**Certificate of Status Desired:** No

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

T&B CONSULTING  
1650 SAND LAKE RD  
STE 233  
ORLANDO, FL 32809 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 P,D  
Name PERALES, ELISETH  
Address 10654 BASTILLE LANE STE 303  
City-State-Zip: ORLANDO FL 32836

Title VP,D  
Name GARCIA, ELIZABETH  
Address 12648 WATFORD WAY  
City-State-Zip: FISHER IN 46037

*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:** ELISETH PERALES

P

05/01/2024

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

\_\_\_\_\_  
Date