2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2006 8:00 am
Secretary of State
06-05-2006 90152 005 ***158.75

DOCUMENT # F50732

1. Entity Name
AVART, INC.

50020859

Principal Place of Business	Mailing Address
1150 NW 72ND AVENUE SUITE 350 MIAMI, FL 33126 US	1150 NW 72ND AVENUE SUITE 350 MIAMI, FL 33126 US

05262006 Chg-P CR2E034 (11/05) _

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2128093 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DAIVARES, LUIS
10620 SW 72TH AVE
MIAMI, FL 33156

7. Name and Address of New Registered Agent

Name Olivares, Luis
Street Address (P.O. Box Number is Not Acceptable)
10620 SW 72nd Avenue
City Miami FL Zip Code 33156

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 reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP OUVARES, LUIS 10620 SW 72ND AVE MIAMI, FL 33156	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Executive V Olivares, Luis	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS WEITMAN, NEAL 1477 PINE BROOK ROAD YORKTOWN HEIGHTS, NY 10598	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DCEO LEHMAN, LAWRENCE H. P 2911 NE 48TH ST LIGHTHOUSE POINT, FL 33064	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV SCHMITZ, WILLIAM J. P 12 THE KNOLL PLEASANTVILLE, NY 10570	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/C Demetrios J Stamatis 1508 Fox Trail Mountainside, NJ 07092	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant S Savino, Michael 1 Lisa Lane Valhalla, NY 10595	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Pepe, Salvatore J. 51 Fulling Avenue Tuckahoe, NY 10707	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Michael Savino Michael Savino 5/30/06 914-967-5800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #