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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **F86279**

(9)

1. Corporation Name AVI, INCORPORATED Principal Place of Business 20235 NE 15TH COURT 20235 NE 15TH COURT										
	H COURT I BEACH FL 33179		NORTH MIAMI BEACH		9 -					
							3. Date incorporated or Qualified 06/22/1982	3a. Da	te of Last Re 02/24/19	
2. Principal Plac	e of Business	2a.	Mailing Address				4. FEI Number		A	pplied For
	O di Bodinoso	26	-				59-2375339			lot Applicable
Suite, Apt. #,	etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		, - · · ·	Additional lequired
		27								
City & State		\vdash	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
l		28	Zip		ountry		This corporation has liability for	intanoible		
Zip 1	Country	29	Σib	30	,cantry		Florida Statutes Ye			
	9. Name and Address of Curre		ered Agent		Т		10. Name and Address of New	Registere	d Agent	
	a. Hame and Addition				81	Name				
DDD 1	/AN				82	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
DROR, Y						G(166) AGO				
19520 N.E. 22 AVE. NORTH MIAMI BEACH FL 33180					B3					
NUNIN	MIAMI DEAON FL 33100				84	City			. 85 Zig	Code
						1	ration submits this statement for the p	F	L. 1	
familiar with SIGNATURE	d agent, or both, in the State of hoth, and accept the obligations of, Sec	J. YUG NOIJO	JOUS, FIORIDA STATUTE	O1L: Register	red Age		ad when renstating)	DATE		
12.	OFFICERS A	NO DIREC		13		<u>.</u>	ADDITIONS/CHANGES TO OF	FICERS A	D Change	Addition
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IAME	DROR, YOAV				NAME					
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	NICOTH LAURIN DERCH EL	2210N								
CITY-ST-ZIP	<u>NORTH MIAMI BEACH FL</u>	33 100	רו חנו נונ		CHY-	51-211			[7] Change	Addition
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4.1 do nereby 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 it made under 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 it made under certify 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 11 if changed, or on an attachment with an address.

SIGNATURE;

TURE AND TYPED OR PRINTED NAME

DKOK (/R

PRESIDENT

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