

# 2000 UNIFORM BUSINESS REPORT (UBR)

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**FILED**  
**Aug 08, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90093 003 \*\*\*150.00

DOCUMENT # J85329

1. Entity Name  
**AVANTI CERAMIC MANUFACTURING, CORP.**

(R)

Principal Place of Business

Mailing Address

to HOSSEIN FAKHAR  
1801 N. 52ND ST.  
TAMPA FL 33619

1801 N 52ND ST  
1801 N. 52ND ST.  
TAMPA FL 33619-3109  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc

City & State

City & State

4. FEI Number **59-2845088**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

FAKHAR, HOSSEIN  
1801 N. 52ND ST.  
TAMPA FL 33619

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

**FILE NOW!!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSD	<input type="checkbox"/> Delete
NAME	FAKHAR, HOSSEIN	
STREET ADDRESS	1801 N. 52ND ST.	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

pd 150.00  
ck #5037

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-26-00 (813) 248-4545

CR2E034 (9/99)



# Commercial Checking

01 2173455012442 031 140 14 47 103,204

Attachment  
# 585329  
DW77349



AVANTI CERAMIC  
MANUFACTURING INC  
1801 N 52ND ST  
TAMPA FL 33619

CB

146

Attachment  
# 585329

## Commercial Checking

4/01/2000 thru 4/28/2000

Account number: 2173455012442  
Account holder(s): AVANTI CERAMIC  
MANUFACTURING INC.

Taxpayer ID Number: 592845088

### Account Summary

Opening balance 4/01	\$2,820.09
Deposits and other credits	16,151.80 +
Checks	10,837.75 -
Other withdrawals and service fees	13.05 -
Closing balance 4/28	\$8,121.09

### Deposits and Other Credits

Date	Amount	Description
4/04	160.00	DEPOSIT
4/04	3,840.80	DEPOSIT
4/19	12,151.00	DEPOSIT
<b>Total</b>	<b>\$16,151.80</b>	

### Checks

Number	Amount	Date posted	Number	Amount	Date posted	Number	Amount	Date posted
5022	401.34	4/06	5029	234.65	4/11	5034	127.44	4/25
5023	72.23	4/10	5030	406.62	4/10	5035	330.00	4/28
5025* <i>Sprint</i>	60.23	4/10	5031	242.50	4/14	5036	8.53	4/26
5026	121.22	4/12	5032	396.50	4/21	5038*	3,394.00	4/26
5028*	5,000.00	4/10	5033	42.49	4/24	<b>Total</b>	<b>\$10,837.75</b>	

\* Indicates a break in check number sequence

### Other Withdrawals and Service Fees

Date	Amount	Description
4/12	13.05	COMMERCIAL SERVICE CHARGES FOR MARCH 2000
<b>Total</b>	<b>\$13.05</b>	