

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L16125 (1)

1. Corporation Name

AVANTI DELIVERY SERVICES, INC.



Principal Place of Business

Mailing Address

C/O AVANTI DELIVERY SERVICES  
6022 BENJAMIN RD  
TAMPA FL 33634  
US

C/O AVANTI DELIVERY SERVICES  
P.O. BOX 21064  
TAMPA FL 33622  
US

3. Date Incorporated or Qualified  
09/15/1989

3a. Date of Last Report  
05/16/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

59-2970393

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROIDA & NAPIER, P.A.  
605 75TH AVENUE  
ST. PETERSBURG BEACH FL 33706

81 Name  
WAGNER & Di MAIO L.C.

82 Street Address (P.O. Box Number is Not Acceptable)  
21 GLENS DRIVE WEST

83

84 City  
BOYNTON BEACH FL 85 Zip Code  
33436

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE WAGNER & Di MAIO L.C.,

(NOTE: Registered Agent signature required when reinstating)

07/17/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME CITRO, BART T.  
STREET ADDRESS 1552 HUNTLEIGH CT  
CITY-ST-ZIP OLDSMAR FL

TITLE D  
NAME CITRO, JO ANN  
STREET ADDRESS 1552 HUNTLEIGH CT  
CITY-ST-ZIP OLDSMAR FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11 TITLE D  
12 NAME ARTHUR WAGNER  
13 STREET ADDRESS 21 GLENS DRIVE WEST  
14 CITY-ST-ZIP BOYNTON BEACH, FLORIDA 33436

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARTHUR WAGNER 07/17/96-718 729 7579

Date

Daytime Phone #

CR2E034 (3/96)