

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000045131

Entity Name: AVANT GARDE ENGINEERING, INC.

FILED
Oct 10, 2005
Secretary of State

Current Principal Place of Business:

1520 LAND O LAKES BOULEVARD
TROPICAL VILLAGE SUITE A
LUTZ, FL 33549

New Principal Place of Business:

3632 LAND O LAKES BOULEVARD
COPPERSTONE SUITE 105
LAND O LAKES, FL 34639

Current Mailing Address:

1520 LAND O LAKES BOULEVARD
TROPICAL VILLAGE SUITE A
LUTZ, FL 33549

New Mailing Address:

3632 LAND O LAKES BOULEVARD
SUITE 105
LAND O LAKES, FL 34639

FEI Number: 59-3665803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUDDY D FORD P A
115 NORTH MACDILL AVENUE
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

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: BUDDY D FORD

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OLIVIER, RAYMOND E
Address: 21910 HALE ROAD
City-St-Zip: LAND O'LAKES, FL 34639

Title: VD () Delete
Name: BARNETT, WINTHROP S
Address: 708 E. VIRGINIA AVENUE
City-St-Zip: TAMPA, FL 33603

Title: DT () Delete
Name: OLIVIER, TAMMY M
Address: 21910 HALE ROAD
City-St-Zip: LAND O'LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: TAMMY M OLIVIER

DT

10/10/2005

Electronic Signature of Signing Officer or Director

Date