2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000001118

Entity Name: AVANTE' INVESTMENTS/ENTERPRISES, INC.

FILED Mar 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3101 SW 34TH AVE SUITE 905-4187 3101 SW 34TH AVE OCALA, FL 34474 STE 905-418

OCALA, FL 34474 US

Current Mailing Address: New Mailing Address:

3101 SW 34TH AVE SUITE 905-4187 3101 SW 34TH AVE OCALA, FL 34474 STE 905-418

OCALA, FL 34474 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RYAN, LISA D
3101 SW 34TH AVE SUITE 905-4187
OCALA, FL 34474
US
RYAN, LISA D
3101 SW 34TH AVE
STE 905-418

CALA, FL 34474 US STE 905-418 OCALA. FL 34474 US

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: LISA RYAN 03/11/2005

Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

D () Delete Title: P (X) Change () Addition

Name: RYAN, LISA Name: RYAN, LISA D

Address: 3101 SW 34TH AVE SUITE 905-4187 Address: 3101 SW 34TH AVE SUITE 905-418

City-St-Zip: OCALA, FL 34474 City-St-Zip: OCALA, FL 34474

Title: D () Delete Title: VP (X) Change () Addition Name: JOHNSTON, W G

 Address:
 PO BOX 771357
 Address:
 PO BOX 771357

 City-St-Zip:
 OCALA, FL 34477
 City-St-Zip:
 OCALA, FL 34477

 Name:
 CAMPBELL, SHAWN
 Name:
 CAMPBELL, SHAWN

 Address:
 700 SE 67TH LANE
 Address:
 6370 S.W. 127TH PL

 City-St-Zip:
 OCALA, FL 34477
 City-St-Zip:
 BELLEVIEW, FL 34420

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: LISA RYAN P 03/11/2005