

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P05000086297

1. Entity Name

AVA GROUP, INC



FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

06

2. Principal Place of Business

16508 Amberwind Lane

Suite, Apt. #, etc.

3. Mailing Address

same

Suite, Apt. #, etc.

City & State

Lutz, Florida

City & State

4. FEI Number

32-0152240

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee RequiredDO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Victor Camejo

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

16508 Amberwind Lane

City

Lutz

FL

Zip Code

33558

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

9/18/06

Signature, typed or printed name of registered agent and date of signature

(FAC) Registered Agent Signature (typed or printed name)

Date

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	Camejo, Victor	10604 Echo Lake Drive	Odessa, FL 33556

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	Camejo, Victor	16508 Amberwind Lane	Lutz, FL 33558

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 319.07(3)(f), 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 10 or on an attachment with an address valid all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

9/18/06

**AVA GROUP, INC
16508 AMBERWIND LANE
LUTZ, FL 33558**

September 18, 2006, 2006

Division of Corporations
Annual Report Section
P.O. Box 6327
Tallahassee, FL 32314

REF: AVA GROUP INC – P05000086297

Dear Sir or Madam:

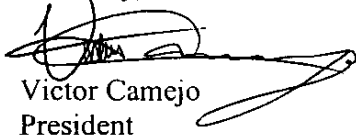
Please be advised that the above mentioned uniform business report was never received for timely submission.

Therefore, we are requesting that the delinquent fees be waived, and that the corporation is allowed to submit a second annual report with the corresponding fee of \$ 150.00.

Please advise.

Thank you for prompt attention to the above mentioned matter.

Sincerely,


Victor Camejo
President

VC/rr