2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# P13671

Entity Name: AVANTI SECURITIES CORPORATION

Current Principal Place of Business:

923 N. PENNSLVANIA
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

923 N. PENNSLVANIA
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 98-0077479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, CHARLES
923 N. PENNSYLVANIA AVE
WINTER PARK, FL 32789 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: LOEB, DONALD E.
Address: 22 ST CLAIR AVE E #1700
City-St-Zip: TORONTO ONTARIO CANA,

Title: VSD ( ) Delete
Name: SCHWARTZ, CHARLES
Address: 923 N. PENSYLVANIA AVE
City-St-Zip: WINTER PARK, FL 32787

Title: VP ( ) Delete
Name: SHAPIRO, M
Address: 923 N. PENNSYLVANIA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: AS ( ) Delete
Name: KABOUREK, ANNE
Address: 923 N PENNSYLVANIA AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: S ( ) Delete
Name: ROSEN, DAWN
Address: 22 ST CLAIR AVE. EAST, #1700
City-St-Zip: TORONTO, ONTARIO CAN,

Title: AT ( ) Delete
Name: VOLOSIN, BERNADETTE
Address: 923 N PENNSYLVANIA AVENUE
City-St-Zip: WINTER PARK, FL 32789

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:

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 exemption stated in Chapter 119, 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: ANNE KABOUREK AS 02/13/2009

Electronic Signature of Signing Officer or Director — Date