


2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

04 OCT -1 PM 3:30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000054162			
1. Entity Name AVANTI EXPORT, INC.			
Principal Place of Business 8060 NW 103 ST UNIT B-13 MIAMI, FL 33186		Mailing Address 10415 SW 146 AVE MIAMI, FL 33186	
2. Principal Place of Business 8060 NW 103 ST Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc. STATE	
City & State HIALEAH GARDENS		City & State STATE	
Zip 33016		Country DADE FLA	
4. FEI Number 65-0535122		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent LEFEVRE, ROSANNA 10415 S.W. 146 AVENUE MIAMI, FL 33186		7. Name and Address of New Registered Agent Name: MARIO PERGER Street Address (P.O. Box Number is Not Acceptable) <del>6873 NW 126 AVE</del> City: PARK LAND FL Zip Code: 33076	
B. 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. I am familiar with, and accept the obligations of, the registered agent. SIGNATURE: <i>Mario Perger</i> MARIO PERGER DATE: 09-14-04			
Amended AR is \$81.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	PVD	<input type="checkbox"/> Delete	
NAME	LEFEVRE, ROSANNA	PRESIDENT	
STREET ADDRESS	10415 S.W. 146TH AVE		
CITY-ST-ZIP	MIAMI, FL 33186		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	MARIO PERGER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MARIO PERGER		
STREET ADDRESS	6873 NW 126 AVE		
CITY-ST-ZIP	PARKLAND FL 33076		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Rosanna Lefevre</i>		ROSANNA LEFEVRE	
SIGNATURE: <i>Mario Perger</i>		MARIO PERGER	
305-820-5403			