FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000043671 (4)

ADVANTI AND ASSOCIATES, INC.							
Principal Place of Business 5624 N.W. 79 AVENUE MIAMI FL 33166		Maning Address 5624 N.W. 79 AVENUE MIAMI FL 33166-3533		* (is Annii Bindan ilkin airii 1901	ia Pere umra	
					3. Date Incorporated or Qualified 06/05/1994	3a. Date of Last R 03/14/1996	eport
2. Principal Pl.	ace of Business	2a. Maling Address			4. FEI Number	·· 	oplied For
21		26			65-0569272	No	ot Applicable
Suite, Apt. #, etc		Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75		
City & State		City & State					equired
23 City & State	•	28			Election Campaign Financing Trust Fund Contribution		May Be
Zip Country		Zip Country			Added to Fees or intangible tax under s. 199.032,		
24	25	29			Florida Statutes Yes No		
	g. Name and Address of Current F	Registered Agent			10. Name and Address of New Re	gistered Agent	
BEC	KNO, JOHN N		81	Namø			
)2 SW 145TH CT		82	82 Street Address (P.O. Box Number is Not Acceptable)			
MIAN	AI FL 33186		-				
			83				
			84	City		FL 85 Zip	Code
11. Pursuant t	o the provisions of Sections 607.0502 a	and 607,1508, Florida Statu	tes the above	e-named o	corporation submits this statement for the c		ts registered
office or re agent. I ar	egistered agent, or both, in the State of infamiliar with, and accept the obligation	Florida Such change was ons of, Section 607.0505, Fl	authorized by lorida Statutes	the corp	corporation submits this statement for the poration's board of directors. I hereby accept	ot the appointment as	registered
SIGNATURE	Signatiste : (ypolition prints dithalore of regularised agent a	(NZ)	Tr. florense of the		equired when reinstaling)	DATE	
12.	OFFICERS AND I		13.	nt signature i	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TOLE	DP	DELETE	1.1 TITLE	Ţ	PRESIDENT	Change	Addition
NAME	BECKNO, HEATHER		1 2 NAME		RIEN DISTORY		
STREET ADDRESS	10502 SW 145TH CT		13 STREET	ADDRESS	5053 SW 154PL		
CITY-S1-7/P	MIAMI FL 33186		14 CiTY-S	T-ZIP	Mid 1-C 33185		···
TITLE	DS	L] DELETE	21 TITLE	ľ	VICE PRETIDENT	Change	Addition
NAME	BECKNO, JOHN N		2.2 NAME		FATHIA LYN 8081 LAKE DR #205		
STREET ADDRESS	10502 SW 145TH CT		2.3 STREET	1	miami , FL 33166		
CITY-ST-ZIF	MIAMI FL 33186 DT DELETE		2 4 CITY - 5 3.1 TITLE	ST-ZIP	SECLETARY ETREASULER	Change	Addition
NAME.	KAMICKA, RUDYARD	Drait	3.1 TITLE 3.2 NAME		LUDYALD KHMIKA	. A Change	noution
STHEFT ADDRESS	13751 S.W. 145 TERRACE		3.3 STREET	Annarce	13751 Sw/45 FRAL		
City-St-7IP	MIAMI FL 33186		3.4. CITY - S		MITA FC 33186		
164E	D	DELETE	4.1 TITLE		K.K. L. L. C.	Change	Addition
NAME	DISTON, GLENFORD		4. 2 NAME	}			
STREET ADDRESS	5053 SW 154 PLACE		4.3 STREET	ADDRESS			
C(TY+ST-Z(P	MIAMI FL 33185		4.4 CITY - S	T- 2 (P			
TITLE		DELETE	5.1 TITLE			Change	Addition
NAM t			5.2 NAME				
STREET ADDRESS			5.3 STREET	ì			
CITY+ST-ZIP		Dolere	5 4 CITY-S	T-21P		[] Ohnn	T Addition
THE		☐ DELETE	6 † TITLE	ĺ		Change	Addition
NAME OFFICE ACCORDED			62 NAME	ADDOCCO			
STREET ADDRESS			63 STREET				
14. I do hereb	y certify that the information supplied v	with this filing does not oua	64 City-S lify for the exe		ated in Section 119.07(3)(i), Florida Statute	es. I further certify that	t the
to Comment of	af to at a discussion and an account of a completion account	cale acada la Carcada acada di la	trick and near	water man	that my signature shall have the same lega eport as required by Chapter 607, Florida S	al affact on it made un	reformath, that

SIGNATURE:

TIPLE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-97

(305) 569-0038

FILED

Feb 05 1997 8:00am

Secretary of State

Daytime Phone #