## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

Principal Place of Business

P94000056318 (6)

Mailing Address

## GAVANT INVESTMENT INCORPORATED

10421 SW 142ND AVENUE 10421 SW 142ND AVENUE MIAM! FL 33186 MIAMI FL 33186 3a. Date of Last Report 3. Date Incorporated or Qualified 05/01/1995 07/29/1994 Applied For 4 FELNumber 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0511729 26 21 \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Suite, Apt. #, etc Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State Oity & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Ζip Country  $Z_{10}$ Yes No Etorida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) LEON, ANTONIO 10421 SW 142ND AVENUE 83 MIAM! FL 33186 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florid t Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Fingle-based Agen't agreeture recoined which recreated with Signature, typed or printed nonle of registered agost and title if apply sit is ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1.1 1111.6 TITLE 1.2 NAME NAME LEON, ANTONIO 1.3 STREET ADDRESS 10421 SW 142ND AVENUE STREET ADDRESS 1.4 C:TY - \$1 - ZIP MIAMI FL 33186 CITY-ST-ZIP Change ☐ Addition □ DELETE 2.11016 THTLE 2.2 NAME NAME LEON, AURORA V 2.3 STHEFT ADDRESS 10421 SW 142ND AVENUE STREET ADDRESS MIAMI FL 33186 2.4 CITY - \$1 - ZIP CITY-ST-ZIP Addition DEL É TÉ 3 1 T-TLF THILE VD. NAME LEON, ANTHONY 3.3 STREET ADDRESS 10421 SW 142ND AVENUE STREET ADDRESS 3 4 CHY-ST-ZIP MIAMI FL 33186 CHTY - ST - ZIP Addition □ DELETE 4 1 THEE TITLE 42 NAME NAME LEON-MATA, VIVIANNA 4.3 STREET ADDRESS 15045 SW 148TH PLACE STREET ADDRESS 4.4 CHY S1 - Z.2 MIAMI FL 33196 CITY-ST-ZIP Change Addition DELETE 5 1 TITLE THILE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or directory of the corporation or true receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block

5.2 NAME

6 1 TITLE

6.2 NAME

DE LETE

5.3 STREET ADDRESS

6.3 STREET ADORESS

6.4 CHY-ST-ZIP

5.4 CiTY - ST - ZiP

SIGNATURE:

NAME

TIFLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TD

MATA, GUSTAVO E

**MIAMI FL 33196** 

15045 SW 148TH PLACE

CR2E034 (12/95)

Addition

☐ Change