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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P94000056318 (6)

GAVANT INVESTMENT INCORPORATED

FILED Apr 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						n ingeloog iin edist dirii adiii dolk baik odiol oliol biidh kind iibi ibii ibii
10421 SW 142ND AVENUE MIAMI FL 33186		10421 SW 142ND AVENUE MIAMI FL 33186				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
				4_		07/29/1994
⊢ ·	Place of Business	2a. Mailing Address		A		4. FEI Number Applied For
21	H -4-	26		8.		65-(1511729 Not Applicable
Suite, Apt.	. ж. еіс.	Suite, Apt. #, etc.		ı		5. Certificate of Status Desired Section 5. Section 5. Certificate of Status Desired Fee Required
City & Stal	te	City & State				6. Election Campaign Financing \$5.00 May Be
23		28		8_		Trust Fund Contribution Added to Fees
Ζιρ —	Country	Zip	L Co	try	'	8. This corporation owes or has paid the current year Intangible
24	[25]	[29]	30	I		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren	it Hegistered Agent		81	Name	10. Name and Address of New Registered Agent
LEON, ANTONIO				1 °'	Name	
10421 SW 142ND AVENUE				82	Street Add	dress (P.O. Box Number is Not Acceptable)
MIAMI FL 33186						
				83		
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statut	es, the a	abovi	e-named cor	poration submits this statement for the purpose of changing its registered
office or i agent. I a	registered agent, or both, in the State am familiar with, and accept the obligi	of Florida. Such change was a ations of, Section 607.0505, Flo	authoriza orida Sta	ed by alules	the corpora s.	ation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOT	E Register	ed Age	ent signature requ	uited when reinstating) DATE
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1,1 7	TITLE		☐ Change ☐ Addition
NAME	LEON, ANTONIO		1.2 8	NAME		
STREET ADDRESS	10421 SW 142ND AVENUE		1.3 9	STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186		1.4 (CITY-S	T-ZIP	
TITLE	SD	DELETE	2.1 1	TITLE		Change Addition
NAME	LEON, AURORA V		2.2 8	NAME		·
STREET ADDRESS	10421 SW 142ND AVENUE		2.3 5	STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186		2.4	CITY-S	ST-ZIP	
TITLE	VD	☐ DELETE		TITLE		Change Addition
NAME	LEON, ANTHONY		3.21	NAME		
STREET ADDRESS	10421 SW 142ND AVENUE		3.3 5	STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186			CITY-S	1	
TITLE	TD	☐ DELETE		TITLE	····	Change Addition
NAME	LEON-MATA, VIVIANNA		4.2	NAME		
STREET ADDRESS	15045 SW 148TH PLACE				ADDRESS	
CITY-ST-ZIP	MIAMI FL 33196			CITY-S		
TITLE	TD	DELETE	5.1 T		. 417	Change Addition
NAME	MATA, GUSTAVO E		1	NAME	1	
STREET ADDRESS	15045 SW 148TH PLACE				ADDRESS	
CITY-ST-ZIP	MIAMI FL 33196			SIREEI SITY-S		
TITLE	NWMIII I E W 100	DELETE	6.1 T		1-28	Change Addition
NAME		_ white	4	NAME		Griange Audinor
STREET ADDRESS					4000000	
	1				ADDRESS	
CITY-ST-ZIP	I		640	MY-S	T-71P I	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or man attachment with an actress.

SIGNATURE:

305-387-167J