

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000001286 (0)

1. Corporation Name

AVGROUP INTERNATIONAL, INC



Principal Place of Business

130 ENTERPRISE AVE
PALM BAY FL 32909

Mailing Address

130 ENTERPRISE AVE
PALM BAY FL 32909

3. Date Incorporated or Qualified

01/04/1995

3a. Date of Last Report

2. Principal Place of Business

21 130 Enterprise Ave.

Suite, Apt. #, etc.

22 Suite C

City & State

23 Palm Bay, FL 32909

Zip

24 32909

Country

25 Brevard

2a. Mailing Address

26 130 Enterprise Ave

Suite, Apt. #, etc.

27 Suite C

City & State

28 Palm Bay, FL 32909

Zip

29 32909

Country

30 Brevard

4. FFI Number

59-3286245

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

INTEGRATED MARKETING CONCEPTS INC
130 ENTERPRISE AVE
PALM BAY FL 32909

10. Name and Address of New Registered Agent

81 Name
Ann R. King

82 Street Address (P.O. Box Number is Not Acceptable)
524 Commodore Avenue, NW

83

84 City
Palm Bay

FL

85 Zip Code
32907

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Ann R. King

Ann R. King President

5-20-96

(Signature, typed or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V.P. & Director ☒ DELETE
NAME Brent Shewbridge
STREET ADDRESS 1401 Hayworth Circle NW
CITY-ST-ZIP Palm Bay, FL 32907

TITLE Chairman/ Director ☒ DELETE
NAME Ronald Gallagher
STREET ADDRESS 130 Enterprise Ave.
CITY-ST-ZIP Palm Bay, FL 32909

TITLE President ☒ DELETE
NAME Robert Timper
STREET ADDRESS Halber Street
CITY-ST-ZIP Palm Bay, FL 32907

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/ Director ☐ Change ☒ Addition

1.2 NAME Ann R. King
1.3 STREET ADDRESS 524 Commodore Ave NW
1.4 CITY-ST-ZIP Palm Bay, FL 32907

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Bank deposit \$ 200.00

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 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 on an attachment with an address.

SIGNATURE:

Ann R. King

ANN R. KING

4-29-96

407-676-7832

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)