

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

**FILED**  
**May 07 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

**DOCUMENT # H41155 (3)**  
 1. Corporation Name  
**APOLO BUILDERS, INC.**



Principal Place of Business: **2940 SW 148TH AVE DAVIE FL 33331 US**  
 Mailing Address: **2940 SW. 148 AVE. DAVIE FL 33331 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>02/01/1985</b>	
2. Principal Place of Business 21 <b>14650 S.W. 29 PLACE</b> Suite, Apt #, etc: 22	2a. Mailing Address 26 <b>14650 S.W. 29 PLACE</b> Suite, Apt #, etc: 27
4. FEI Number <b>59-2522898</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23 City & State <b>DAVIE, FL</b> 24 Zip <b>33330</b> 25 Country <b>US</b>	28 City & State <b>DAVIE, FL</b> 29 Zip <b>33330</b> 30 Country <b>US</b>

9. Name and Address of Current Registered Agent  
**APOLINARO, BURT**  
**2940 SW. 148 AVE.**  
**DAVIE FL 33331**

10. Name and Address of New Registered Agent  
 81 Name **BURT APOLINARIO**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**14650 S.W. 29 PLACE**  
 83  
 84 City **DAVIE** FL 85 Zip Code **33330**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>APOLINARIO, BURT E.</b>	
STREET ADDRESS	<b>2940 SW 148 A. VE.</b>	
CITY-ST-ZIP	<b>DAVIE FL</b>	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>14650 S.W. 29 PLACE</b>
1.4 CITY-ST-ZIP	<b>DAVIE, FL</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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 on an attachment with an address.

SIGNATURE: Burt Apolinario 3/21/98 954-476-1001

CR2E034 (10/97)