

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

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90043 024 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P98000005312

1. Corporation Name
APC MATERIALS, INC.

Principal Place of Business 2700 W. ATLANTIC BLVD #200-6 POMPANO BEACH, FL 33069	Mailing Address 2700 W. ATLANTIC BLVD #200-6 POMPANO BEACH, FL 33069
--	--

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
 1/20/98

2. Principal Place of Business 3032 E. COMMERCIAL BLVD Suite, Apt. #, etc. #51 City & State FT. LAUDERDALE, FL Zip 33009	2a. Mailing Address 3032 E. COMMERCIAL BLVD Suite, Apt. #, etc. #51 City & State FT LAUDERDALE FL Zip 33008
---	--

4. FEI Number 65-0806413	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 owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

ADDY PATRICIA COTE
 2700 W. ATLANTIC BLVD #200-6
 POMPANO BEACH, FL 33069

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	3032 E. COMMERCIAL BLVD
83 #	51
84 City	FT. LAUDERDALE, FL
85 Zip Code	33008

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 *Addy Patricia Cote* **Addy Patricia COTE** DATE **Apr 6/99**

Signature, typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	ADDY PATRICIA COTE	
STREET ADDRESS	2700 W. ATLANTIC BLVD. #200-6	
CITY-ST-ZIP	POMPANO BEACH, FL 33069	☐ DELETE
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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		☒ Change ☐ Addition
1.2 NAME	ADDY PATRICIA COTE	
1.3 STREET ADDRESS	3032 E. COMMERCIAL BLVD # 51	
1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33008	
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		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE: *Addy Patricia Cote* **Addy Patricia COTE** DATE **Apr 6/99**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #