

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90019 007 ***150.00

DOCUMENT # P99000097447
1. Entity Name
AP Miami, Inc. ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 100 SE 2 nd Street		3. Mailing Address 100 SE 2 nd Street	
Suite, Apt. #, etc. Suite 3500		Suite, Apt. #, etc. Suite 3500	
City & State Miami, FL		City & State Miami, FL	
Zip 33131	Country USA	Zip 33131	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE	7. Name and address of Current Registered Agent Name Registered Agents of Florida, LLC Street Address (P.O. Box Number is Not Acceptable) 100 SE 2 nd Street, Suite 3500 City Miami FL Zip 33131
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/ CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/S/T Guelman, Alejandro 100 SE 2 nd Street, Suite 3500 Miami, FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Rennert, Charles J. 100 SE 2 nd Street, Suite 3500 Miami, FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Charles J. Rennert* Charles J. Rennert, Assistant Secretary 2-8-02 305-577-4177
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Berman Rennert Vogel & Mandler, P.A.

February 8, 2002

BRV&M

Attachment
822507

#P 99 000097447

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399
Attn: Annual Reports

Re: 2002 Uniform Business Report for AP Miami, Inc.
(Document # P99000097447)

Gentlemen:

Enclosed is a 2002 Uniform Business report for AP Miami, Inc. together with a check in the amount of \$150.00 made payable to the Department of State.

Sincerely,



Staci Kimmel,
Paralegal

Enclosures