

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000063639

Entity Name: APA FINANCIAL RESOURCES, INC.**Current Principal Place of Business:**1072 NORTH OCEAN BLVD
N/A
PALM BEACH, FL 33480**Current Mailing Address:**1072 NORTH OCEAN BLVD
N/A
PALM BEACH, FL 33480 US**FEI Number: 37-1606918****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOEPPPEL, JOEL P
400 S AUSTRALIAN AVE SUITE 300
N/A
WEST PALM BEACH, FL 33401 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title D
Name ABOUZEID, GEORGE ACEO
Address 1072 NORTH OCEAN BLVD
City-State-Zip: PALM BEACH FL 33480Title COO
Name HARBONIS, STEFAN CVP
Address 7117-21 LAKE WORTH RD
City-State-Zip: LAKE WORTH FL 33467Title VP
Name ABOUZEID, ANDREW PVP
Address 7117-21 LAKE WORTH RD
City-State-Zip: LAKE WORTH FL 33480Title D
Name ABOUZEID, DIANA DDIR.
Address 1072 NORTH OCEAN BLVD
City-State-Zip: PALM BEACH FL 33480Title ADMR
Name ROSENZWEIG, CECILIA XADMINIS
Address 7117-21 LAKE WORTH RD
City-State-Zip: LAKE WORTH FL 33467Title TREA
Name GEORGE, MELISSA MTREASUR
Address 7117-21 LAKE WORTH RD.
City-State-Zip: LAKE WORTH FL 33480

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GEORGE ABOUZEID**D****02/08/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date