

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000095736

**Entity Name:** APSA SERVICES, INC.

**Current Principal Place of Business:**

2315 NW 107TH AVENUE  
SUITE 1M28 BOX 117  
DORAL, FL 33172

**Current Mailing Address:**

IMC SAP #203  
PO BOX 52-9300  
MIAMI, FL 33152

**FEI Number:** 45-3719589

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GAGEL, JAMES  
2030 S. DOUGLAS RD., SUITE 109  
CORAL GABLES, FL 33134 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           DPS  
Name           BOBADILLA, JOSE R  
Address        2315 NW 107TH AVENUE SUITE 1M28  
                  BOX 117  
City-State-Zip: DORAL FL 33172

Title           DV  
Name           LOPEZ, JORGE A  
Address        2315 NW 107TH AVENUE SUITE 1M28  
                  BOX 117  
City-State-Zip: DORAL FL 33172

Title           DV  
Name           BOBADILLA, CARLOS F  
Address        2315 NW 107TH AVENUE SUITE 1M28  
                  BOX 117  
City-State-Zip: DORAL FL 33172

*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:** JORGE LOPEZ

**MANAGER**

**04/30/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date