FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 AM 9:23

DOCUMENT # **542628** **(3)**

1. Corporation Name
APEX INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
~~444 BRICKELL AVENUE~~ ~~SUITE 1050~~ ~~MIAMI FL 00131~~	~~444 BRICKELL AVENUE~~ ~~SUITE 1050~~ ~~MIAMI FL 33131~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/09/1977
3a. Date of Last Report: 01/19/1994

2. Principal Place of Business
21: 5200 Blue Lagoon Dr.
Suite Apt # etc. 22: #600
City & State 23: Miami FL
Zip 24: 33126 Country 25: USA

2a. Mailing Address
26:
Suite Apt # etc. 27:
City & State 28:
Zip 29: Country 30:

4. FEI Number: 59-1794198 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LEDER, NATHAN I.
~~444 BRICKELL AVENUE, SUITE 1050~~
~~MIAMI FL 33131~~
5200 Blue Lagoon Drive
#600
Miami, FL 33126

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95	
TITLE	PD	61 TITLE	☒ Change ☐ Addition
NAME	LEDER, NATHAN I	62 NAME	
STREET ADDRESS	~~444 BRICKELL AVE~~	63 STREET ADDRESS	5200 Blue Lagoon Drive #600
CITY ST ZIP	~~MIAMI, FL 00000~~	64 CITY ST ZIP	Miami, FL 33126
TITLE		71 TITLE	☐ Change ☐ Addition
NAME		72 NAME	
STREET ADDRESS		73 STREET ADDRESS	
CITY ST ZIP		74 CITY ST ZIP	
TITLE		81 TITLE	☐ Change ☐ Addition
NAME		82 NAME	
STREET ADDRESS		83 STREET ADDRESS	
CITY ST ZIP		84 CITY ST ZIP	
TITLE		91 TITLE	☐ Change ☐ Addition
NAME		92 NAME	
STREET ADDRESS		93 STREET ADDRESS	
CITY ST ZIP		94 CITY ST ZIP	
TITLE		101 TITLE	☐ Change ☐ Addition
NAME		102 NAME	
STREET ADDRESS		103 STREET ADDRESS	
CITY ST ZIP		104 CITY ST ZIP	
TITLE		111 TITLE	☐ Change ☐ Addition
NAME		112 NAME	
STREET ADDRESS		113 STREET ADDRESS	
CITY ST ZIP		114 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, or on an attachment with an address.

SIGNATURE: Nathan I. Leder 1/12/95 (305) 267-5200
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR Date Daytime Phone Number

0132111 CP