**FILED** 

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUI 1. Entity Name	MENT # 728610		Mar 27, 2001 8:00 an Secretary of State					
APPLE (	CREEK UNIT TWO, INC.				03-05-2001 9	0368 005 **	***61.25	
Principal Place	e of Business	<del>- · · · · · · · · · · · · · · · · · · ·</del>						
APPLE CREEK REC. CNT. 7301 W SUNRISE BLVD PLANTATION FL 33313		APPLE CREEK REC CENTER 7301 W SUNRISE BLVD. PLANTATION FL 33313			32324			
US 2. Principal Pla	ace of Business	US  3. Mailing Address						
					a ibadin bears liber ibnis Stider erter sam dieber bedin anten binne denn krait, benr			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Numb	4. FEI Number 59-1698257 Applied For Not Applicable			
Zip	Country	Zip	· Country	5. Certificate	of Status Desired	\$8.75 Ad Fee Require	ditional ed	
	B. Name and Address of Current F	legistered Agent		7. Name and	Address of New Register	ed Agent		
معد بدوجو			Name	<u> </u>			- `	
HOBART, I		Street	Street Address (P.O. Box Number is Not Acceptable)					
	UNRISE BLVD ON FL 33313				•			
, 50,,,,,,			City		FL Zip Code			
	FILE NOW:	Financing	\$5.00 May Be Added to Fees		ck Payable to	-		
	FEE IS \$61.25	Trust Fund Contribu				ent of State		
TITLE	OFFICERS AND DIRE	CTOHS Delete	TITLE	ADDITIONS/CH	ANGES TO OFFICERS AND	Change		
STREET ADDRESS	FLETCHER, LORNA 7163 W. SUNRISE BLVD. PLANTATION FL	<del>-</del>	name Street address City-St-Zip					
NAME STREET ADDRESS	DP FEDERMAN, ANNE 7215 W. SUNRISE BLVD.	Deleta	TITLE NAME STREET ADDRESS	FEDERMA 1215W SU	NA ANNE	☐ Change	☐ Addition	
	PLANTATION FL DS	Delete	CITY-ST-ZIP	Plantation	FL 33313	. Change	☐ Addition	
NAME -	ABDULLAH, PERVAR		NAME STREET ADDRESS					
	7175 W. SUNISE BLVD PLANTATION FL 33313		CITY-ST-ZIP					
TITLE NAME STREET ADDRESS		· Defete	NAME STREET ADDRESS	KIM Add	9MS LINGUE BLUD	☐ Change	Addition	
CITY-\$1-ZIP			CITY-ST-ZIP	Plantation	r - 33313	·		
TITLE NAME STREET ADDRESS	-	☐ Delete	TITLE NAME STREET ADDRESS			Change	Addition	
CITY-ST-ZIP	<del></del>	☐ Delete	CITY-ST-ZIP			☐ Change ⊃	Addition	
NAME			NAME				_	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				, ·	
indicated on of the corpo	tify that the information supplied with the other report or supplemental report is treation or the receiver or trustee empower on an attachment with an address, with	ue and accurate and that my ered to execute this report as	signature shall h	lave the same legal effect	as if made under oath: that	t am an officer	or director	