

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02701

FILED
Apr 17, 2006
Secretary of State

Entity Name: APEX ADJUSTMENT BUREAU, INC.

Current Principal Place of Business:

5701 STIRLING ROAD
DAVIE, FL 333147431 US

New Principal Place of Business:

Current Mailing Address:

5701 STIRLING ROAD
DAVIE, FL 333147431 US

New Mailing Address:

FEI Number: 59-2029544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUTTON, RANDY
5701 STIRLING ROAD
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

DRZEWIECKI, ANTHONY
5701 STIRLING ROAD
DAVIE, FL 33314 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: ANTHONY DRZEWIECKI

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: EISENACHER, CRAIG
Address: 5701 STIRLING ROAD
City-St-Zip: DAVIE, FL 33314

Title: PD () Delete
Name: SCHAFANI, JAMES JR.
Address: 5701 STIRLING RD.
City-St-Zip: DAVIE, FL 33314

Title: S () Delete
Name: HAMMOND, GREGORY
Address: 5701 STIRLING RD.
City-St-Zip: DAVIE, FL 33314

Title: V () Delete
Name: DEHEER, GEORGE
Address: 5701 STIRLING RD.
City-St-Zip: DAVIE, FL 33314

Title: V () Delete
Name: NOONAN, SIMON
Address: 5701 STIRLING RD.
City-St-Zip: DAVIE, FL 33314

Title: V () Delete
Name: BURTCHE, DOUGLAS
Address: 5701 STIRLING RD.
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GREGORY HAMMOND

SD

04/17/2006

Electronic Signature of Signing Officer or Director

Date