SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

APEX INSTRUMENTS SERVICE, INC.

FILED Sep 21, 1999 8:00 am Secretary of State

09-21-1999 90022 047 ***550.00



Principal Place of Business Mailing Address								
5595 NW 36TH STREET 5595 NW 36TH STREET								
MIAMI FL 33166			, l	MIAMI FL 33166				DO NOT WRITE IN THIS CRASE
							Ļ	DO NOT WRITE IN THIS SPACE
ĺ							1	3. Date Incorporated or Qualified
								07/29/1983
2. Principal Place of Business				2a. Mailing Address			Ì	4. FEI Number Applied For
21				26				59-2316771 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.			1	5. Certificate of Status Desired \$8.75 Additional
22				27				Fee Required
City & State				City & State			- 7	6. Election Campaign Financing 55.00 May Be
23			2	28				Trust Fund Contribution L_ Added to Fees
Zip	T-	Country	Zip Cou			<i>,</i>		8. This corporation owes the current year
24	2	5	2	29 30)	Intangible Personal Property. Yes No
9. Name		_	of Current Res	nt Registered Agent				10. Name and Address of New Registered Agent
					81		Name	· · · · · · · · · · · · · · · · · · ·
HIDA	LGO, LUIS N	Л.			82	L		
15630 N.W. 83RD PLACE				, ,		ļ	Street Address	s (P.O. Box Number is Not Acceptable)
MIAMI FL 33016				}		+		, , , , , , , , , , , , , , , , , , , ,
]					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 nereby accept the appointment as registered								
agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.								
SIGNATURE								
organization, specific production and specific product						13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	P	OFFI	CERS AND DI		1,1 TITLE			Change Addition
TITLE	l -	LIKO MA		DELETE	1.2 NAME			C. Change C. Addition
NAME	HIDALGO,							
STREET ADDRESS	7161 W 2N				1.3 STREE	T AI	DDRESS	
CITY-ST-ZIP	HIALEAH F	<u> </u>			1.4 CITY S	T-Z	ZIP	
TITLE	٧			DELETE	2.1 TITLE		Ì	Change Addition
NAME	HIDALGO,	maria a.			2.2 NAME			
STREET ADDRESS	7161 W 2N	D WAY			2.3 STREET	TA	ODRESS	
CITY-ST-ZIP	HIALEAH F	L			2.4 CITY-S	T-Z	ŽIP .	·
TITLE		_		DELETE	3.1 TITLE			Change Addition
NAME					3,2 NAME]	
STREET ADDRESS					3.3 STREE	T A	DDRESS	
					3.4 CITY-S		ĺ	
CITY-ST-ZIP TITLE				DELETE	4,1 TITLE	172		Change Addition
(☐ Derese	4.2 NAME		ļ	
NAME					1			
STREET ADDRESS					4.3 STREE			
CITY-ST-ZIP_					4.4 CITY-S	T-Z	ŽIP	
TITLE	.			DELETE	5.1 TITLE		ĺ	Change Addition
NAME					5.2 NAME		\	
STREET ADDRESS	1				5.3 STREE	TA	NDORESS	
CITY-ST-ZIP					5,4 CITY-S	T-Z	ZIP	
TITLE				DELETE	6.1 TITLE			Change Addition
NAME					6.2 NAME		į	-
STREET ADDRESS]				6.3 STREE	TAI	ODRESS	
CITY-ST-ZIP					6.4 CiTY-S			

14. I hereby certify that the information supplied with this filing 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:

CR2E034 (5/99)