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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

J21709

(7)

Mailing Address

AMERICAN PRODUCTS INTERNATIONAL, INC.

1010 E. 31ST STREET 1010 E. 31ST STREET HIALEAH FL 33013 HIALEAH FL 33013 3a. Date of Last Report 3. Date Incorporated or Qualified 05/01/1995 06/27/1986 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-2704743 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State \Box Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Ζıρ Country Zip Florida Statutes Yes No

10. Name and Address of New Registered Agent 30 29 25 24 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) 82 FORMAN TERRY J 1521 SW LEJEVNE DR 83 **SUITE 2400** 85 Zip Code CORAL SPRINGS FL 33134 City 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 o', Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prince mane of registered agent and the Lapy 4, able (NOTE: Registered Agent signature recorded when real stateg-CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE **PSD** 1.2 NAME JEFFERS, JAMES A. NAME 1.3 STREET ADDRESS 7711 N.W. 15TH STREET STREET ADDRESS 1.4 CITY - ST- ZIP PEMBROKE PINES FL CITY-ST-7IP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS

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14. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 durporation 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 high an attachment with an address.

SIGNATURE:

CITY - ST - ZIP

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SNATURE AND TYPED DRIPRINTED NAME OF SIGNING OFFICER OF DIRECTOR

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