FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J95895

(5)

APCO SERVICES, INC.

Principal Place of Business Mailing Address % SALEEM J. HAMATY % SALEEM J. HAMATY 9805 S.W. 128TH ST. 9805 S.W. 128TH ST MIAMI FL 33176 MIAMI FL 33176-563							
						ate of Last R /29/1996	eport
2. Principal l	Piace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			65-0007907		t Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta 23	de	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip	⊣	untry	8. This corporation has liability for intangible		. 199.032,
24	25	29	30		Florida Statutes Yes		
Name and Address of Current Registered Agent HAMATY, SALEEM J				81 Name	10. Name and Address of New Registered	Agent	_,,,
	AMI FL 33176 If to the provisions of Sections 607 registered agont or both, in the Sent familiar with, and accept the o	.0502 and 607.1508, Florida Sta State of Florida. Such change wa bligations of, Section 607.0505,	tutes, the a is authorize Florida Sta	84 City above-named corporatutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	. `` ′	Code ts registered registered
SIGNATURE	Sign dare typed a proted name of regators	en agent and ritle II applicable. (N	IOTE: Flegislen	ed Agent signature requ	aired when reinstaling) DATE		
12.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN		
TILE	D	DELETE	1.1 ?	ITLE		Change	Addition
NAME	HAMATY, SALEEM J		1.2 M	IAME			
STREET ADDRESS	1		1.3 8	TREET ADDRESS			
C(1)Y+S1+Z(P	MIAMI FL 33176			CITY - ST - Z(P			
THLE		☐ DELETE	2.1 7)	•	Change	L Addition
NAME			2.21				
STREET ADDRESS			2.3 5	STREET ADDRESS			
Cary-SI-7IP				CITY-ST-ZIP		10	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
THIF		☐ DELETE	3.17	1		☐ Change	Addition
NAME			321				
STREET ADDRESS	5		335	TREET ADDRESS			

6.4 CITY-ST-ZIP CITY - \$1 - ZIP 14. I do 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 propiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12

3.4. CITY - ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE

CITY: ST-Z6

STREET ADDRESS

STREET ADDRESS CDY - \$1 - 20

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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NAME

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Change

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FILED

May 08 1997 8:00am

Secretary of State

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