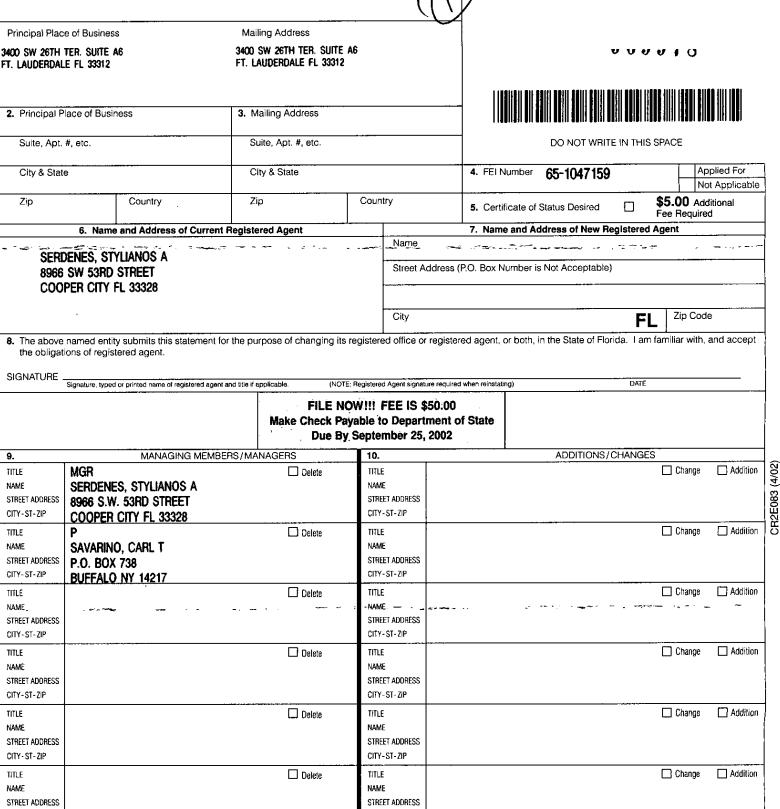
2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000013753

1. Entity Name

APOLLONIOS ENTERPRISES LLC



FILED Jul 10, 2002 8:00 am Secretary of State

07-10-2002 90198 016 ****50.00

9.	MANAGING MEMBERS/MA	ANAGERS	10.	ADDITIONS/CHANGES		
TITLE	MGR	☐ Delete	TITLE		Change	Addition
NAME	SERDENES, STYLIANOS A		NAME			
STREET ADDRESS	8966 S.W. 53RD STREET		STREET ADDRESS			
CITY-ST-ZIP	COOPER CITY FL 33328		CITY-ST-ZIP			
TITLE	P	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	SAVARINO, CARL T	_ 5000	NAME			
STREET ADDRESS	P.O. BOX 738		STREET ADDRESS			
CITY-ST-ZIP	BUFFALO NY 14217		CITY-ST-ZIP			
TITLE	- WWI.1-1-19-W. 1.1.1	☐ Delete	TITLE		☐ Change	Addition
NAME	2012 - Norman		-NAME. —	ستجمعها والمناز والمحيهي والمراج فالمعارض		-
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change	Addition
NAME		L Delete	NAME		Li onango	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
						□ Addition
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition
NAME			NAME OTDEET ADDRESS			
STREET ADDRESS			STREET ADDRESS			
CITY - ST - 7IP			CITY-ST-ZIP			

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE