

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M23581

Entity Name: A.P.I.T., INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

4166 WOODS END RD
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

4166 WOODS END RD
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 59-2605717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DI DOMENICO, TRUDY
4166 WOODS END RD
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

DIDOMENICO, TRUDY
4166 WOODS END RD
BOCA RATON, FL 33487 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: TRUDY DIDOMIENICO

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAPITULNIK, ABRAHAM
Address: 4166 WOODS END ROAD
City-St-Zip: BOCA RATON, FL 33487

Title: VPD () Delete
Name: KAPITULNIK, PHILIP S
Address: 7704 NATURE TRAIL
City-St-Zip: LAKE LAND, FL 33809

Title: SD (X) Delete
Name: DI DOMENICO, TRUDY
Address: 4166 WOODS ENDS ROAD
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAPITULNIK, PHILIP
Address: 7704 NATURE TRAIL
City-St-Zip: LAKE LAND, FL 33809

Title: STD (X) Change () Addition
Name: DIDOMENICO, TRUDY
Address: 4166 WOODS END ROAD
City-St-Zip: BOCA RATON, FL 33487

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

I hereby certify that the information supplied with this filing does not qualify 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: TRUDY DIDOMENICO

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01/28/2009

Electronic Signature of Signing Officer or Director

Date