## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**SIGNATURE** 

## Feb 04, 2004 8:00 am DOCUMENT # M46647 **Secretary of State** 1. Entity Name 02-04-2004 90033 003 \*\*\*150.00 APOLLO SUPPLY CO., INC. Principal Place of Business Mailing Address 5214 SW 128 AVE MIAMI FL 33175-5436 8000 N.W. 67TH ST **MIAMI FL 33134** 2. Principal Place of Business 3. Mailing Address 7180 S.W. 42nd. TERRACE 7180 S.W. 42nd. TEPRACE Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-2767633 MIAMI, MIAMI, FL Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33155-4606 U.S.A. 33155-4606 U.S.A. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARAJANO JORGE TARAJANO, JORGE A. 5214 SW 128 AVE MIAMI FL 33175-5436 MTAMT 8. The above named entity submits this statement r the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of restered agent. TARAJANO, JORGE A. (Pres.) JAN-29-2004. SIGNATURE . (NOTE: Registered Agent signature required when reinstating) FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. XX Delete TITLE XIXI Change Addition TARAJANO, JORGE A. NAME NAME TARAJANO, JORGE A. STREET ADDRESS 5214 SW 128 AVE STREET ADDRESS 7180 S.W. 42 TERRACE MIAMI FL 33175-5436 CITY-ST-ZIP CITY-ST-7IP 33155-4606 MTAMI. TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TAPAJANO, JORGE A. (Pres.)-JAN-29-2004.

(<sup>13</sup>05) 669 - 4380

**FILED**