

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000073431

Entity Name: A P S PUBLISHING INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

5730 NW 199 ST
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

5730 NW 199 ST.
MIAMI, FL 33015

New Mailing Address:

FEI Number: 65-1100849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTOS, JUAN J
5730 NW 199 ST.
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANTOS, JUAN J
Address: 5730 N.W. 1TH ST.
City-St-Zip: MIAMI, FL 33015

Title: VD () Delete
Name: SANTOS, NELLY A
Address: 5730 N.W. 1TH ST.
City-St-Zip: MIAMI, FL 33015

Title: SD () Delete
Name: SANTOS, MARLYN
Address: 5730 N.W. 1TH ST.
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NELLY SANTOS

VD

04/24/2007

Electronic Signature of Signing Officer or Director

Date