

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P000000 81195

1. Entity Name

Aptix Communications Corp

FILED

02 SEP 16 AM 9:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

500007833605--3

-09/18/02--01067--002

\*\*\*\*750.00 \*\*\*\*750.00  
DO NOT WRITE IN THIS SPACE

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

852 EAST HIALEAH DRIVE

3. Mailing Address

852 EAST HIALEAH DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIALEAH, FLORIDA

City & State

HIALEAH, FLORIDA

Zip

33010

Country

U.S.A.

Zip

33010

Country

U.S.A.

4. FEI Number

651055906

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Pedro O Alonso

Street Address (P.O. Box Number is Not Acceptable)

852 EAST HIALEAH DRIVE

City

HIALEAH

FL

Zip Code

33010

8. 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

Roger Fabelo

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	Roger Fabelo	931 SW 29 Ave	Miami Florida 33135
VP	Pedro O. Alonso	852 EAST HIALEAH DRIVE	HIALEAH FLORIDA 33012
T	Ernesto Alonso	852 EAST HIALEAH DRIVE	HIALEAH FLORIDA 33010

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

**REINSTATEMENT**

02

02

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roger Fabelo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-12-02

Date

Daytime Phone #