

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91343 002 ***150.00

DOCUMENT # P00000085469

1. Entity Name
APPLE INVESTMENT GROUP, INC.



Principal Place of Business
**2788 NE 5 STREET
POMPAÑO BEACH FL 33062-4925**

Mailing Address
**2788 NE 5 STREET
POMPAÑO BEACH FL 33062-4925**

2. Principal Place of Business
1461 SW 12 AVE

3. Mailing Address
1461 SW 12 AVE

Suite, Apt. #, etc.
D

Suite, Apt. #, etc.
D

City & State
POMPAÑO BEACH FL.

City & State
POMPAÑO BEACH FL.

Zip
33069

Country
BROWARD

Zip
33069

Country
BROWARD

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1055559**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**APPLEGATE, EDWARD
2788 NE 5 STREET
POMPAÑO BEACH FL 33062**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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

EDWARD APPLGATE (NOTE: Registered Agent signature required when reinstating)

4/20/03 DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **APPLEGATE, EDWARD**
STREET ADDRESS **2788 NE 5 STREET**
CITY-ST-ZIP **POMPAÑO BEACH FL 33062-4925**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **APPLEGATE, MARION**
STREET ADDRESS **2788 NE 5 STREET**
CITY-ST-ZIP **POMPAÑO BEACH FL 33062-4925**

TITLE ☐ Change ☒ Addition
NAME **SECURITY APPLEGATE**
STREET ADDRESS **1461 SW 12 AVE # D**
CITY-ST-ZIP **POMPAÑO BEACH, FL 33069**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
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.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRES. EDWARD APPLGATE **4/20/03** **954** **675-8046** Date Daytime Phone #

CR2E034 (10/02)