

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000101696

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: A P LOGISTIC CORPORATION

## Current Principal Place of Business:

8550 W. FLAGLER STREET  
#111  
MIAMI, FL 33144

## New Principal Place of Business:

## Current Mailing Address:

8550 W. FLAGLER STREET  
#111  
MIAMI, FL 33144

## New Mailing Address:

FEI Number: 65-1051215

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VINCENT, PAULA L  
8550 W. FLAGLER STREET  
#111  
MIAMI, FL 33144

## 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: PST ( ) Delete  
Name: VINCENT, PAULA L  
Address: 5512 N.W. 114TH AVENUE #305  
City-St-Zip: MIAMI, FL 33178

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: VINCENT, PAULA L  
Address: 8550 W. FLAGLER ST  
City-St-Zip: MIAMI, FL 33144

Title: SEC ( ) Change (X) Addition  
Name: SCOTTO, LEONARDO J  
Address: 8550 W. FLAGLER ST  
City-St-Zip: MIAMI, FL 33144

Title: SEC ( ) Change (X) Addition  
Name: PUGGIONI, GABRIEL G  
Address: 8550 W. FLAGLER ST  
City-St-Zip: MIAMI, FL 33144

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VINCENT PAULA

PST

04/30/2003

Electronic Signature of Signing Officer or Director

Date