P01000 107550

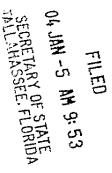
(Red	uestor's Name)				
		:			
(Address)					
(Add	ress)	:			
,	·				
(Cib)	/State/Zip/Phone	· *^			
City	otate/Zip/Filone	z #)			
PICK-UP	TI WAIT	☐ MAIL			
	L ****				
(Bus	iness Entity Nan	ne)			
(Document Number)					
Cartified Copies	Cortificates	of Status			
Certified Copies Certificates of Status					
Special Instructions to F	iling Officer:	···			
		• •			

Office Use Only



900025783509

01/05/04--01046--001 **35.00



7/1 ches Mm/1/9/04

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: A.P.D. Hordings ING. (Name of corporation)
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHRISTOPHER FARAH (Name of person)
(Name of firm/company)
STE 101, 1915 NE 45TH ST. (Address)
FT. LAUDERDALE, FL 33308 (City/state and zip code)
For further information concerning this matter, please call:
CHRISTOPHER FARAH at (954) 229-2435 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(09/03)

33

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

change is submitt	rovisions of sections 607.0502, 617.0 ed for a corporation organized under stered office or registered agent, or b	the laws of the State of	FLORIDA	
1. The name of the	e corporation: A. P. D. H	OLDINGS TNO	· .	
2. The principal of	ffice address: STE. 101.	1915 NE 45	TH ST.	
<u>F</u> T	LAUDERDALE FL	33308		· · · · · · · · · · · · · · · · · · ·
3. The mailing ad	dress (if different):			
4 Data of incom	oration/qualification: Nov 7	Dogument number	- DA OG 1575	
	street address of the current registered			
	ROBERT DZI	1 RGOT		
,	2415NF	8TH ST.		
	FT. LAUD	EROPLE, F	c 33304	ip o
6. The name and (if changed):	street address of the new registered ag	ent (if changed) and /or re	gistered office	FILI JAN -5 BECRETAR BLLAHASS
	CHRISTOPHER !	FARAH		[TT]
,	STE 101, 1915 (P.O. Box or person	NE 45TH S	T:	M 9: 1
	FT. LAUD BE	DALE, PL 3	3308	53 ATE IRIDA
The street addres	s of its registered office and the stre dentical.	et address of the business	office of its registere	ed agent, as
Such change was	authorized by resolution duly adop corporation has been notified in wri	ted by its board of directoring of the change.	ors or by an officer so	authorized by
(Si	mature of an oil scer or director)	CHR	TOPHER Frinted or typed name and title	FARAH - DIR
duties, and I am being filed mere	he appointment as registered agent comply with the provisions of all si familiar with and accept the obligat y to reflect a change in the registere writing of this change.	and agree to act in this co atutes relative to the proj ion of my position as regi d office address, I hereby	npacity. per and complete per stered agent. Or, if t confirm that the cor	formance of my his document is poration has
_ Chr	ignimure of Registered Agent)	D£	ECEMBER 1,	7003
If signing on bel	,			
	(Typed or Printed Name)		(Capacity)	

* * * FILING FEE: \$35.00 * * *