

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
 05-13-2002 90036 021 ***150.00

0012852 AT

DOCUMENT # P01000110789

1. Entity Name
APOGEE COMMUNICATIONS, INC.

Principal Place of Business

3898 10TH ST NE
ST. PETERSBURG FL 33703

Mailing Address

3898 10TH ST NE
ST. PETERSBURG FL 33703

2. Principal Place of Business

3898 10th St NE

Suite, Apt. #, etc.

3. Mailing Address

3898 10th St NE

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

St PETERSBURG, FL

City & State

St PETERSBURG, FL

4. FEI Number

59-3758501

Applied For

Not Applicable

Zip

33703

Country

FLORIDA

Zip

33703

Country

FLORIDA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BALBONI, BRIAN W
3898 10TH ST NE
ST. PETERSBURG FL 33703

7. Name and Address of New Registered Agent

Name BRIAN W BALBONI
Street Address (P.O. Box Number is Not Acceptable)

3898 10th St NE

City ST PETERSBURG

FL

Zip Code 33703

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

Brian W Balboni **BRIAN W BALBONI**

Brian W Balboni

4/24/02

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) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN OF SYSTEMS DEVELOPMENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BRIAN W BALBONI 3898 10th St NE ST PETERSBURG, FL 33703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN OF OPERATIONS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition RIZWAN SHEIKH 10901 ROOSEVELT BLVD ST PETERSBURG, FL 33716
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN OF VOKE SYSTEMS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JAMES ALBRAND 115-10th St N ST PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brian W Balboni **BRIAN BALBONI**

4/24/02

727-823-8458

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)