

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003350

FILED
Apr 30, 2007
Secretary of State

Entity Name: APECOR CORP.

Current Principal Place of Business:

3259 PROGRESS DR
STE A
ORLANDO, FL 32826

New Principal Place of Business:

Current Mailing Address:

3259 PROGRESS DR
STE A
ORLANDO, FL 32826

New Mailing Address:

FEI Number: 59-3761391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHOURY, ANTOINE
3259 PROGRESS DR
STE A
ORLANDO, FL 32826 US

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: D () Delete
Name: WU, WENKAI DR.
Address: 7 BEVERLY COMMONS DR #32
City-St-Zip: BEVERLY, MA 01915

Title: P () Delete
Name: KHOURY, ANTOINE
Address: 1189 NEWTON CT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: WEIHONG, QIU DR
Address: 22701 92ND AVENUE # L301
City-St-Zip: KENT, WA 98031

Title: D () Delete
Name: WU, WENKAI DR
Address: 133 ARYAULT RD
City-St-Zip: EAST GREENWICH, RI 02818

Title: V () Delete
Name: MENSAH, ADJE F
Address: 12022 PASTEUR DRIVE APT # 408
City-St-Zip: ORLANDO, FL 32826 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: KHALID, RUSTOM W
Address: 10538 SUN VILLA BLVD
City-St-Zip: ORLANDO, FL 32817

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANTOINE KHOURY

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date