

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107865

Entity Name: APONTE ENTERPRISES, INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

7635 NW 27TH AVE
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

7635 NW 27TH AVE
MIAMI, FL 33147

New Mailing Address:

FEI Number: 76-0763634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APONTE, RENE
820 SW 134 PL
MIAMI, FL 33184 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: PD () Delete
Name: APONTE, RENE
Address: 820 SW 134 PL
City-St-Zip: MIAMI, FL 33184

Title: VPD () Delete
Name: APONTE, EDWIN
Address: 820 SW 134 PL
City-St-Zip: MIAMI, FL 33184

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: DIR () Change (X) Addition
Name: APONTE, WILKYNS A
Address: 820 SW 134 PL
City-St-Zip: MIAMI, FL 33184

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: RENE APONTE

PD

02/19/2009

Electronic Signature of Signing Officer or Director

Date