## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P03000143822

1. Entity Name APB & J CORPORATION

**FILED** Feb 25, 2008 08:00 AM Secretary of State

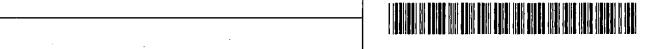
CR2E034 (11/05)

Fee Required

Principal Place of Business

653 N. DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168 Mailing Address

653 N. DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168



## DO NOT WRITE IN THIS SPACE

02042008 No Chg-P		CR2E034 (11/05)		
4. FEI Number			Applied For	
36-4544	647		Not Applicable	
E Cortificato a	f Chatria Daoiread		\$8.75 Additional	

6. Name and Address of Current Registered Agent

BOSKER, JACK R 653 N. DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168

## DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  ACE  SIGNATURE  SI							
FILE NOW!!! FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finant Trust Fund Contribution				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D BOSKER, JACK R 653 N. DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168		•		U00000839992 03/06/08-80030-016 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOSKER, PAMELA J 653 N. DIXIE FREEWAY NEW SMYRNA BEACH, FL 32168						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S, T BOSKER, PAMELA J 5300 S ATLANTIC AVE # 3304 NEW SMYRNA BEACH, FL 32169			DO	NOT WRITE		
TITLE NAME STREET ADDRESSCITY-ST-ZIP —				IN .	THIS SPACE		
NAME 12.3	ed a superior of the control of the	5 Fig. upp Cartifact Thistish and To Hebbert	<u>(</u> )	Added to Fires			
-STREET ADDRESS	الا المنظم ا والتي والإن المنظم			SS of Albhole Fire menent viet out commissions	and antifestations account for an experience of the contract o		
CITY-ST-ZIP  TITLE  NAME 3 5 5  STREET ADDRESS  CITY-ST-ZIP			motions con	tained in Chapter 116	9, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.