

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90003 012 ***150.00

DOCUMENT # P05000023751 1. Entity Name APSBIZOP, INC.			
Principal Place of Business 109 N CORTEZ DR - CIRCLE H MARGATE, FL 33068		Mailing Address 109 N CORTEZ DR - CIRCLE H MARGATE, FL 33068	
2. Principal Place of Business 1501 NE 40th ST.		3. Mailing Address 1501 NE 40th ST.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State POMPANO BEACH, FL.		City & State POMPANO BEACH, FL.	
Zip 33064	Country USA	Zip 33064	Country
4. FEI Number 20-2332430		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PLASEYED, AHMAD 109 N CORTEZ DR - CIRCLE H MARGATE, FL 33068		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1501 NE 40th ST. City POMPANO BEACH FL Zip Code 33064	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Ahmad Plaseyed</i></u> 02/08/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PLASEYED, AHMAD 109 N CORTEZ DR - CIRCLE H MARGATE, FL 33068 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1501 NE 40th ST POMPANO BEACH, FL. 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD PLASEYED, SUSAN 109 N CORTEZ DR - CIRCLE H MARGATE, FL 33068 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1501 NE 40th ST. POMPANO BEACH, FL. 33064
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.			
SIGNATURE: <u><i>Ahmad Plaseyed</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		02/08/06 (954) 783-9267 <small>Date Daytime Phone #</small>	