

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000100108

Entity Name: APEX PROCESSING CO. INC

FILED
May 28, 2008
Secretary of State**Current Principal Place of Business:**4699 N STATE RD 7
L5
FT LAUDERDALE, FL 33319 US**New Principal Place of Business:****Current Mailing Address:**4699 N STATE RD 7
L5
FT LAUDERDALE, FL 33319 US**New Mailing Address:**

FEI Number: 72-1604551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GARRITY, MARK
4699 N STATE RD 7
L5
FT LAUDERDALE, FL 33319 US**Name and Address of New Registered Agent:**ST FORT, MONIQUE
4699 N STATE RD 7
L5
FT LAUDERDALE, FL 33319 US

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: MONIQUE ST FORT

05/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DIR () Delete
Name: GARRITY, MARK
Address: 4699 N STATE RD 7 STE L5
City-St-Zip: FT LAUD, FL 33319 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PRES (X) Change () Addition
Name: ST FORT, MONIQUE
Address: 4699 N STATE RD 7 STE L5
City-St-Zip: FT LAUD, FL 33319 US

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: MONIQUE ST FORT

PRES

05/28/2008

Electronic Signature of Signing Officer or Director

Date