

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107622

Entity Name: APEX COMMERCIAL REALTY, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

3317 NW 10TH TERRACE
SUITE 409
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

3317 NW 10TH TERRACE
SUITE 409
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 20-5396419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, MAURICE
3317 NW 10TH TERRACE
SUITE 409
FORT LAUDERDALE, FL 33309 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: P.S () Delete
Name: STEWART, MAURICE
Address: 3317 NW 10TH TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33309 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P.S () Change (X) Addition
Name: JANET, STEWART R
Address: 3317 NW 10TH. TERRACE #409
City-St-Zip: FT. LAUDERDALE, FL 33309

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: MAURICE STEWART

PS

04/30/2007

Electronic Signature of Signing Officer or Director

_____ Date