2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080169

Entity Name: APEX NETWORK SERVICES, INC.

FILED Apr 21, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

8635 FRANJO ROAD 10894 SW 188TH STREET CUTLER BAY, FL 33189 CUTLER BAY, FL 33157

Current Mailing Address: New Mailing Address:

8635 FRANJO ROAD 10894 SW 188TH STREET CUTLER BAY, FL 33189 CUTLER BAY, FL 33157

FEI Number: 22-3966105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition

Title: RICHCREEK, JIMMIE A RICHCREEK, JIMMIE A Name: Name: 8635 FRANJO ROAD 10894 SW 188TH STREET Address: Address: City-St-Zip: MIAMI, FL 33189 City-St-Zip: CUTLER BAY, FL 33157

Title: VP O Title: VP O (X) Change () Addition () Delete CALAIS, JAMES D Name: CALAIS, JAMES D Name:

8635 FRANJO ROAD 10894 SW 188TH STREET Address: Address: CUTLER BAY, FL 33189 CUTLER BAY, FL 33157 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition VP Q VP Q

LOPEZ, JOSE A LOPEZ, JOSE A Name: Name:

8635 FRANJO ROAD 10894 SW 188TH STREET Address: Address: City-St-Zip: CUTLER BAY, FL 33189 City-St-Zip: CUTLER BAY, FL 33157

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: JIMMIE RICHCREEK PD 04/21/2009