2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Jun 22, 2007 8:00 am Secretary of State

05-18-2007 90020 020 ***150.00

<u>&</u>		
OCHMENT:	# P93000029443	

1. Entity Name APEX HOME CORP.



Principal Place of Business

7301 SW 57 COURT

SUITE 565

SOUTH MIAMI, FL 33143

Mailing Address

7301 SW 57 COURT

SUITE 565

SOUTH MIAMI, FL 33143

66019672



05032007

5/1

No Chg-P

CR2E034 (11/05)

4.	FEI Number
	65-0485562

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, GARY 4000 HOLLYWOOD BLVD

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#265- SOUTH HOLLYWOOD, FL 33021				IN THIS SPACE				
8. The above the obligat	named entity submits this statement for the fons of registered agent.	purpose of changing its re	gistered off	ice or re	egistered agent, or bo	oth, in the State of Florida. I am lamiliar with, and accept		
SIGNATURE	Signature, typed or otherd name of registered agent and tri	e f applicable. (NOTE, R	egistered Agen	signature	required when reinstating)	DATE		
	LE NOWIII FEE IS \$150.00 ue by September 14, 2007	Election Campaign Trust Fund Contrib			\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10.	· OFFICERS AND DIRE	CTORS			.			
TITLE NAME STREET ADDRESS CITY-S1-2IP	P GREENWALD, ALLEN R 7301 SW 57 COURT SOUTH MIAMI, FL 33143			• •				
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-		DO	NOT WRITE		
TITLE HAME STREET ADDRESS CITY-S1-ZIP					IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY+ST-ZIP					•	•		
TITLE			1		•			

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 Tepota as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an address, with all objective empowered.

SIGNATURE: _

STREET ADDRESS CITY-ST-ZIP

IG OFFICER OR DIRECTOR