

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000049984 (6)**

1. Corporation Name
APPLECORE ASSOCIATES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 12427 ROCKLEDGE CIRCLE BOCA RATON FL 33428-815 US	Mailing Address 12427 ROCKLEDGE CIRCLE BOCA RATON FL 33428-815 US
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2. Principal Place of Business 21 22071 MARTELLA AVE Suite, Apt. #, etc. 22 City & State 23 BOCA RATON FL Zip 24 33433-4659 25 US		2a. Mailing Address 26 22071 MARTELLA AVE Suite, Apt. #, etc. 27 City & State 28 BOCA RATON FL Zip 29 33433-4659 30 US		3. Date Incorporated or Qualified 07/09/1993
		4. FEI Number 65-0429616		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent FLORENTINO, MICHAEL 12427 ROCKLEDGE CIRCLE BOCA RATON FL 33428		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 22071 MARTELLA AVE 83 84 City BOCA RATON FL 85 Zip Code 33433	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Michael Florentino* *Pres* *4/6/98*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD FLORENTINO, MICHAEL 12427 ROCKLEDGE CIRCLE BOCA RATON FL 15	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	22071 MARTELLA AVE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	BOCA RATON FL 33433-4659
TITLE	VTD GOODRICH, GERALD 12427 ROCKLEDGE CIRCLE BOCA RATON FL 15	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	22071 MARTELLA AVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	BOCA RATON FL 33433-4659
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Michael Florentino* *Pres* *4/6/98* *561 499 6137*

CR2E034 (10/97)