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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000060962 (6)

APOGEE PROJECTS, INC.

FILED Mar 24 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						4 DOORERS ALE TRADE THAT BOTH BOTH BOTH BUTTER BINTE	OUTUR TRIFO DIFFE FIOT 1501	
1175 N.E. 125 STREET SUITE 305 NORTH MIAMI FL 33161-5010			1175 N.E. 125 STREET SUITE 305 NORTH MIAM! FL 33161-5010		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified			
2. Principal Place of Business			2a. Mailing Address	2a. Mailing Address		08/15/1993 4. FEI Number	Applied For	
21			26	26		65-0440246	Not Applicable	
22	Suite, Apt #, el	C.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23	City & State		City & State	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24	Zip	Country 25	Zip 29	Country 30	/	This corporation owes or has paid the curr Personal Property Tax due June 30.	rent year Intangible] Yes No	
ļ	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
GORDON, ELAINE 1830 NE 144 ST				82		dress (P.O. Box Number is Not Acceptable)		
SUITE D N MIAMI FL 33181				83				
				84	,,	FL	85 Zip Code	
	office or registi agent. I am far	e provisions of Sections 607.0 ered agent, or both, in the St miliar with, and accept the ob	3502 and 607.1508, Florida Statut ate of Florida Such change was oligations of, Section 607.0505, Fl	tes, the abov authorized b lorida Statute	e-named y the corp s.	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appora-	changing its registered pintment as registered	
51	GNATURE Signar	ure, typed or printed nation of registered	agont and trie if applicable (NOI	I E: Registered Ag	ent signature	required when reinstating) DATE		
12				13.	 	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
711	LE D		☐ DELETE	1.1 TITLE			Change Addition	
	uc Gr	DOWN ELVINE		4.0 514540				

Gordon, Elaine STREET ADDRESS 4000 TOWERSIDE TERR 1.3 STREET ADDRESS **MIAMI FL 33138** CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ___ Addition NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 suppliemental 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 coreiver 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.

March 20 1998