

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT

1995  
5-1-95



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

55 MAY -1 PM 8:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000078986 (5)

1. Corporation Name

ACTION PRO REALTY, INC.

Principal Place of Business

10422 TAFT ST.  
PEMBROKE PINES FL 33026  
US

Mailing Address

10422 TAFT ST.  
PEMBROKE PINES FL 33026  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/16/1993

3a. Date of Last Report

04/20/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

2b. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

65-0448810

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

6. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

VALDEZ, WILLIAM J  
10422 TAFT ST.  
PEMBROKE PINES FL 33026

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Agent or Agent or Current Registered Agent and New Registered Agent

Signature of Agent or Current Registered Agent and New Registered Agent

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST., ZIP

DP  
VALDEZ, WILLIAM J  
510 NW 89TH AVE  
PEMBROKE PINES FL 33026

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST., ZIP

VST  
VALDEZ, WILLIAM J  
510 NW 89TH AVE  
PEMBROKE PINES FL 33026

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST., ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST., ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST., ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST., ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE

2. 2. NAME

3. 3. STREET ADDRESS

4. 4. CITY, ST., ZIP

5. 5. TITLE

6. 6. NAME

7. 7. STREET ADDRESS

8. 8. CITY, ST., ZIP

9. 9. TITLE

10. 10. NAME

11. 11. STREET ADDRESS

12. 12. CITY, ST., ZIP

13. 13. TITLE

14. 14. NAME

15. 15. STREET ADDRESS

16. 16. CITY, ST., ZIP

17. 17. TITLE

18. 18. NAME

19. 19. STREET ADDRESS

20. 20. CITY, ST., ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(8), Florida Statutes. I further certify that the information included 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 this corporation or the person or persons authorized to make this report as required by Chapter 432, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report, or on an attached sheet with an address.

SIGNATURE:

William J. Valdez  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

430-0190