

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 6/2/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

FILED

1995 AUG -2 AM 9:18

STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000031885 (4)

1. Corporation Name

APEX COMPUTER CONSULTANTS, INC.

Principal Place of Business

291 E. ALTAMONTE DR.
SUITE 1
ALTAMONTE SPRINGS FL 32714

Mailing Address

291 E. ALTAMONTE DR.
SUITE 1
ALTAMONTE SPRINGS FL 32714

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/25/1994

3a. Date of Last Report

—

4. FEI Number

59-3238224

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

P.O. Box 162386

ALTAMONTE SPRINGS FL

32716

USA

9. Name and Address of Current Registered Agent

MATINA, FRANK J JR
660 GLADES CR.
APT. 6-200
ALTAMONTE SPRINGS FL 32716

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

PORT ORANGE, FL

FL

85 Zip Code

32127

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

Frank J. Matina

(NOTE: Registered Agent signature required when reinstating)

DATE

7.15.95

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MATINA, FRANK J JR
660 GLADES CR., APT. 6-200
ALTAMONTE SPRINGS FL 32716

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
PRESIDENT (P)	FRANK J. MATINA JR	5100 PARK RIDGE, RD	PORT ORANGE, FL 32127	☒	☐
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
				☐	☐
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
				☐	☐
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
				☐	☐
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
				☐	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition
				☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Frank J. Matina
SIGNATURE AND PRINTED OR WRITTEN NAME OF SIGNING OFFICER OR DIRECTOR

7.15.95

904-760-2160
Date