FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90049 045 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000084741 L

1. Entity Name
APOLLO SOUTH CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	DO NOT WRITE IN THIS SPACE
7725 N.W. 128th AVE.	P.O. Box 1376	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State: PARKLAND, Fl.	City & State: BOCA RATON, Fl.	4. FEI Number: 65-0538817 ☐ Applied For ☐ Not Applicable
Zip: 33076 Country: USA	Zip: 33429 Country: USA	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name [redacted]

Street Address (P.O. Box Number is Not Acceptable) [redacted]

City [redacted] FL Zip Code [redacted]

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE ______________________

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT Leslie M. Simmons 599 S.W. 15th ROAD BOCA RATON, Fl. 33432	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT Leslie M. Simmons 7725 N.W. 128th AVE PARKLAND, Fl. 33076
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CR2E034B (12/01)

13. 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 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 report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: ________ Leslie M. Simmons 4/29/02 954-340-5591

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #