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

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLÓRIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P94000091816 (6) **DOCUMENT #** 

APOLLO 3001 SKATING AND ENTERTAINMENT CENTER, IN

Principal Place of Business

Maling Address



PLANTATION FL 33317		PLANTATION FL 33325				
					3. Date incorporated or Qualified 01/01/1995	3a, Date of Last Report
2. Principal Place of Business		2a. Mailing Address	2a, Mailing Address		4. FEI Number	Applied For
21		26 9245 NW	9245 NW 9 PLACE		65-0560644	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	)	City & State	1. FL		Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
Zıp	Country	Zip	Country		8. This corporation has liability for in	
24	25	29 33324	30 BROW	ARD	Florida Statutes	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent
	4-4		81  N	اame وم	NSTANCE E. ST	ANCIL
AMERIL	82 S		eet Address (P.O. Box Number is Not Acceptable)			
	MERIA AVENUE				15 NW 9 PLACE	
CORAL	GABLES FL 33134		83			
			<b>84</b> C	Dity		les Ze Code
			1 1	TLA	NTATION,	FL 85 Zip Code 333334
11. Pursuant to	o the provisions of Sections 607,0502	and 607.1508, Florida Statute	s, the above nan	ied comora	tion submite the statement for the our	occ of changing its registered office.
familiar wit	th, and accept the obligations of, Section	on 607.0505, Florida Statutes	отлу тне согрека	non's board	I of directors. Thereby accept the appo	intment as registered agent. I am
SIGNATURE _	granan typen or protost care of right will age to	Tanal, President NOT	Co Charles Real Section	NSTA 1	WE E . STANCIL,	4-28-96
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	P	☐ DELETE	1. 1 TITLE			Change Addition
NAME	STANCIL, CONSTANCE E		1.2 NAME			
STREET ADDRESS	15 NORTH STATE ROAD 7		3 STREET ADD	HESS		
CITY-ST-ZIP	PLANTATION FL 33317		1.4 City-SE-Zi	P		
THTLE		☐ DELETE	2 1 TITLE			Change Addition
NAME:			2.2 NAME			_
STREET ADDRESS			2.3 STREET ADO	IRESS		
CHTY - ST - ZIP			2.4 CHY-ST ZI	Р		
TITCE		☐ DELETE	3 1 ไม่ไม่ย			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADO	DRESS		
CITY-S1-2IP			3.4 CITY - ST - ZI	p		
TITLE		☐ DECE1E	4 1 IIILE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4 3 STREET ADD	RESS		
CITY - ST - ZIO			4.4.C+TY+ST+Zi	Р		
1016		☐ DELETE	5 1 T-ILE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADO	RESS		
CHTY-ST-ZIP			5.4 City - St - 7ii	P		
THLE		☐ DELET <b>e</b>	6 1 1111.6			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADD	FIESS		
C(TY - ST - ZIP			6.4 CITY - ST - 216	,		
14. I do hereby	y certify that the information supplied v	ith this filing is voluntarly furnis	hed and does no	ot qualify for	the exemption stated in Section 119.0	7(3)(k). Florida Statutes 1 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:

oratance & Stance Provident, 4-28-96, (954) 777-1910