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

P**RO**FIT CORP**O**RATION ANNUA**L** REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040781 (3)

APPLE POLISH, INC.

MIAMI FL 33186

Principal Pla	ace of Business	Mailing Address 9127 S.W. 123RD AVE. CT. MIAMI FL 33186				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
9127 S.W. 1 MIAMI FL 3	123RD AVE. CT. 13186						
						05/22/1995	
2. Principal	Place of Business	2a. Mailing Addres	2a. Mailing Address			4. FEI Number	Applied For
21		26				65-0592469	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Z(p	30 Cou	ntry		This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible ☐ Yes No
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
	IUSCI, FRANK				Name		
9127 S.W . 123RD AVE. CT.				82 Street Address (P.O. Box Number is Not Acceptable)			

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.

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SIGNATURE (NCTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and file if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition TITLE 1.1 TITLE NAME MUSCI, FRANK 9127 S.W. 123RD AVE. CT. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33186 CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE Change Addition TITLE 2.1 TITLE MUSCI, CARLA NAME 2.2 NAME 9127 S.W. 123RD AVE. CT. STREET ADDRESS 23 STREET ADDRESS MIAMI FL 33186 2. 4 CITY-ST-ZIP CITY-S1-ZIP DETLIE THLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-\$1-ZIP 3.4. CITY - \$1 - ZIP DELFTE Change Addition 4.1 TiTLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELCTE. Change Addition TITLE 61 TITLE 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 roport 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 altrachment with an address.

Fig. 1. Mari

9/24/98

FILED

Sep 30 1998 8:00am

Secretary of State

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Zip Code

CR2E034 (10/97