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PROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Jan 21 1998 8:00am Secretary of State

Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P96000008303 (5) APEX INTERIOR, INC. Principal Place of Business Mailing Address 781 DUQUE RD 781 DUQUE RD LUTZ FL 33549 LUTZ FL 33549 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/16/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3356641 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 \Box Trust Fund Contribution Added to Fees Žio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 25 30 Personal Property Tax due June 30. Yes No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered 81 MUNIZ, FELIX JR 781 DUQUE RD Street Address (P.O. Box Number is Not Acceptable) LUTZ FL 33549 Zip Code 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, any accept the obligations of Section 607.0505, Florida Statutes. office or registered agent, or both, in the State of Elo agent, I am familiar with, any accept the obligations Felix Muniz Jr (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change NAME MUNIZ. FELIX JR 1.2 NAME **CR2E034** 781 DUQUE RD STREET ADDRESS 1.3 STREET ADDRESS LUTZ FL 33549 CMY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE DST MUNIZ, ROSE MARIE NAME 2.2 NAME STREET ADDRESS 781 DUQUE RD 2.3 STREET ADDRESS **LUTZ FL 33549** 2. 4 CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change ___ Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIF 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 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 any attachment with an address.

SIGNATURE: X

Felix Muniz Jr

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