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

PROFIT CORPORATION **ANNUAL REPORT**

1997



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000011140 (6) APR FINANCIAL CORP.

Principal Place of Business

Mailing Address

FILED Apr 02 1997 8:00am Secretary of State



8785 EAST 10TH COURT HALEAH FL 33013		3725 EAST 10TH COURT HIALEAH FL 33013-2919				
				3. Date Incorporated or Qualified 02/05/1996	3a. Date of Last Report	
;2. Principal Place of Business		2a. Mailing Address		4. FEI Number		pplied For
21		26		65-0644670	N	lot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	№ / \$8.75	Additional
<u> </u>		27	- 45		Fee P	Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be		
Zip Country		28		Trust Fund Contribution		
Zip	Country 7tp Country 8. This corporation has liability for intangible tax unde					s. 199.032,
24	25 9. Name and Address of Curren	29	30	Florida Statutes 10. Name and Address of New Re	~	
COB	PORATION SERVICE COMPANY	nagratereo Agont	81 Name			
	HAYS STREET			LUIS A ZIEGEN		
	AHASSEE FL 32301-2525		82 Street Add	Iress (P.O. Box Number is Not Acceptat:	ole)	
	SAMMOND I F ARAN (FATA		83	On the		
. + C				3900 E 10th C7		
			041 04	IALEAH	FL 85 Zip	30/3
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statuto	c the above named on	poretion pubmits this statement for the p	urnoeo of changing	ile registered
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.						
2/5//47						
SIGNATURE	Signature, wheel of printed hance of my sterest age	nt and the if application (NOTE	Registered Agent signature requ	vired when reinstating)	DATE	
12.	OFFICE ANI		1 13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12
TITLE	D	DECETE	1.1 TITLE		☐ Change	Addition
NAME	Bastanzuri, remberto		1.2 NAME			
STREET ADDRESS	3725 EAST 10TH COURT		1.3 STREET ADDRESS +]
CITY-ST-ZIP	HIALEAH FL 33013		1.4 DITY - \$1 - ZIP			
TITLE	PD	DETTE	2.1 TITLE		Change	Addition (
NAME	ZEIGENHIRT, LUIS A		2.2 NAME			Į.
STREET ADDRESS	3725 EAST 10TH COURT		2.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33013		2.4 CITY-\$T-7IP			
TOTLE	8	DELFTE	3.1 TOLE		Change	☐ Addition
NAME	THUEMLER, ROSA		3.2 NAME			
STREET ADDRESS	3725 EAST 10TH COURT		3.3 STREET ADDRESS			1
OTY-ST-ZIP	HIALEAH FL 33013		3.4. CITY-\$1-ZIP			
TITLE		DELETE	411IILE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			1
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELFTE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ACIDRESS			
OITY-ST-ZIP			5.4 C(1Y - ST - Z(P			
TITLE		DELFIE	6.1 TOLE		☐ Change	Addition
NAME			6.2 NAME			-
'STREET ADDRESS			63 STREET ADDRESS			l
CITY-ST-ZIP			64 CHY-ST-7/P			
14. I do heret	by certify that the information supplied in indicated on this annual report or s	f with this filing does not qualify upplemental annual report is to	r for the exemption state ue and accurate and tha	d in Section 119.07(3)(i), Florida Statule: it my signature shall have the same lega	 I further certify that I effect as if made un 	: the nder oath: that
l am an ol	flicer or director of the corporation or	the receiver or trustee empower	red to execute this repo	ort as required by Chapter 607, Florida S	talules; and that my	name
appears i	n Block 12 or Block 13 if changed, or	on an attachment with an add	ு s. //			