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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000045124

1. Corporation Name

APPLE FINANCIAL MANAGEMENT SERVICES, INC.

Principal Place of Business

101 N OCEAN DRIVE
STE 208
HOLLYWOOD FL 33019
US

Mailing Address

101 NORTH OCEAN DRIVE
208
HOLLYWOOD FL 33019
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1996

4. FEI Number

65-0667335

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

BRIEN, JOSEPH P.A.
1909 HARRISON STREET
SUITE 212
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name David M. Dombroski
82 Street Address (P.O. Box Number is Not Acceptable)
101 N. Ocean Dr., Suite 208
83
84 City Hollywood FL 85 Zip Code 33019

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.

SIGNATURE *David M. Dombroski*
Signature, typed or printed name of registered agent and title if applicable.

David M. Dombroski
(NOTE: Registered Agent signature required when reinstating)

4/23/99
DATE

12. OFFICERS AND DIRECTORS

TITLE PC
NAME KAHN, JAMES W
STREET ADDRESS 101 N OCEAN DR STE 208
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE VD
NAME DOMBROSKI, DAVID M
STREET ADDRESS 101 N OCEAN DRIVE STE 208
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D
NAME KAHN, DIANA O
STREET ADDRESS 12201 SW 100 STREET
CITY-ST-ZIP MIAMI FL 33186

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T/S/D
1.2 NAME Brenda G. Goodall
1.3 STREET ADDRESS 101 N. Ocean Dr. Suite 208
1.4 CITY-ST-ZIP Hollywood, FL 33019

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

David M. Dombroski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/99
Date

(954) 922-4955
Daytime Phone #

CR2E034 (1/98)