

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90775 012 ***150.00

DOCUMENT # P96000063987

1. Entity Name

GENESIS APS INC.



Principal Place of Business

1161 MID VALLEY DR.
 OLYPHANT PA 18447
 US

Mailing Address

800 BRICKELL AVE
 SUITE 1115
 MIAMI FL 33131

041100



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0685589

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~OPPENHEIM, STEVEN P ESQ-~~
~~800 BRICKELL AVE~~
~~SUITE 1115~~
~~MIAMI FL 33131~~

Name **OPPENHEIM, STEVEN**

Street Address (P.O. Box Number is Not Acceptable)

FIRST UNION BANK BUILDING

800 BRICKELL AVE, STE 1115

City **MIAMI**

FL

Zip Code **33131**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Steven Oppenheim

STEVEN OPPENHEIM

3/2/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
 NAME **BRUCE, AIDAN**
 STREET ADDRESS **ELLERBECK WAY, STOKESLEY INDUSTRIAL PARK**
 CITY-ST-ZIP **STOKESLEY N**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Delete
 NAME **FELLOWS, ROY**
 STREET ADDRESS **547 W. GRANT ST.**
 CITY-ST-ZIP **ORLANDO FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Delete
 NAME **OPPENHEIM, STEVEN P**
 STREET ADDRESS **800 BRICKELL AVE SUITE 1115**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE **S/V** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Steven P. Oppenheim
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN P. OPPENHEIM

SECRETARY 3/21/02

Date

Daytime Phone #

305-371-8335

CR2E034 (9/01)