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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000001262 (9)

APPOLONIA, INC.

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



C/O KTG&S REGISTERED AGENT CORPORATION 100 S.E. 2ND ST. 28TH FLOOR MIAMI FL 33131	C/O KTG&S REGISTERED A 100 S.E. 2ND ST, 28TH FI MIAMI FL 33131		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
6 P	-		01/07/1997	
2. Principal Place of Business 21 150 OCEAN DE	2a. Maiting Address 26 /50 OCE	AN De	4. FEI Number 722838	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 MIAMI BEACH IL	Crity & State 28 /// A/17 1 6	EACH FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 3 3139 25 DADE		Country DADE		☐ Yes 💢 No
g, Name and Address of Current			10. Name and Address of New Registered	Agent
KTG&S REGISTERED AGENT CORPO	PRATION	81 Name		
100 S.E. 2ND ST.	ress (P.O. Box Number is Not Acceptable)			
28TH FLOOR		<u></u>		
MIAMI FL 33131		⁶³		
		84 City	**	85 Zip Code
11 Pursuant to the provisions of Sections 507 0500	and 607 1509 Florida Ctatutas	the above person serve	FL.	
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.				
	ions or, section bur.usds, Fiori	ua sidivies.		[
SIGNATURE Signature, typed or printed name of registered agent	and title if applicable (NOTE: F	Registered Agent signature requi	red when reinstating) DATE	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE DIPISAT	DELETE	1.1 TITLE		Change Addition
Mus Chris Paciello Lu	ayigson	1.2 NAME		
NAME Chris Paciello LU STREET ADDRESS 1439 Washington CITY-SI-ZIP MIAMI BEACH	Juneance	1.3 STREET ADDRESS		Ji
TITLE MIAMI BEACH!	7 33140	1.4 CITY-ST-ZIP	11/	T observed to the second
NAME		21 TITLE	ob-sec Carle	Change Addition
STREET ADDRESS		2.2 NAME 2.3 STREET ADDRESS 2	324 NW 5th AVE	
CITY-ST-ZIP		2.4 City-St-Zip	DIAMI FC 3312	, 1
TITLE	☐ DELETE	3.1 TITLE	11 mil FC 3318	☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CiTY-ST-ZIP	T Drugge	4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change Addition
NAME OTHER ADDRESS		5.2 NAME		l
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME	beece	6.2 NAME		CHANGE CHANGING
STREET ADDRESS				
CITY. ST. 7IP		6.3 STREET ADDRESS		

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 trusted 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.

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