

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90891 009 ***150.00

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AV

DOCUMENT # P98000017194

1. Entity Name

API RENTALS CORP.

Principal Place of Business

**4101 N ANDREWS AVE #101
FT LAUDERDALE FL 33309**

Mailing Address

**4101 N ANDREWS AVE #101
FT LAUDERDALE FL 33309**

2. Principal Place of Business

4101 N ANDREWS

Suite, Apt. #, etc.

#101

City & State

OAKLAND PK FL.

Zip

33309

Country

BROWARD

3. Mailing Address

4101 N. ANDREWS AVE

Suite, Apt. #, etc.

#101

City & State

OAKLAND PK FL.

Zip

33309

Country

BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0821470

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

VINCIK, RICHARD A

**4101 N ANDREWS AVE #101
FT LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **VINCIK, RICHARD A**
CITY-ST-ZIP **4101 N ANDREWS AVE #101
FT LAUDERDALE FL 33309**

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **BRADLEY, NANCY F**
CITY-ST-ZIP **1637 NE 3 AVE
FT LAUDERDALE FL 33305**

TITLE ☐ Delete
NAME **ST**
STREET ADDRESS **VINCIK, SUSAN J**
CITY-ST-ZIP **591 NW 45 CT
FT LAUDERDALE FL 33309**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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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:

Nancy F. Bradley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NANCY F. BRADLEY

3/21/02

954-565-9077

Date

Daytime Phone #

CR2E034 (9/01)