



**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 07, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000049671	
1. Entity Name APEX MORTGAGE, INC.	

Principal Place of Business 1870 NORTH STATE ROAD SEVEN #122 MARGATE, FL 33063	Mailing Address 1870 NORTH STATE ROAD SEVEN #122 MARGATE, FL 33063
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DO NOT WRITE IN THIS SPACE

	
04072004	No Chg-P CR2E034 (10/03)
4. FEI Number 65-0840895	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.76 Additional Fee Required

6. Name and Address of Current Registered Agent

PERKINS, MARY
1870 NORTH STATE ROAD SEVEN
#122
MARGATE, FL 33063

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent Signature required when renewing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000162253 06/07/04-88005-012 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERKINS, MARY 1870 NORTH STATE ROAD SEVEN, #122 MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SAMPSON, NANCY 1870 NORTH STATE ROAD SEVEN, #122 MARGATE, FL 33063
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary Perkins Date: 6-6-04 Daytime Phone #: 954-972-3020