**FILED**
**May 01, 2002 8:00 am**
**Secretary of State**
05-01-2002 91560 039 ***150.00

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000041545

1. Entity Name

APEX ENTERPRISES OF MIAMI, INC.

1183-C West 29th Street
Hialeah, Fl. 33012

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | 14956 SW 75 Terrace<br>Suite, Apt. #, etc. |
| City & State | City & State: Miami, Fl. |
| Zip / County | Zip: 33193 / County: Miami-Dade |

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0925733 ☐ Applied For ☐ Not Applicable

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

RODRIGUEZ, MIGUEL I.
1183-C West 29th Street
Hialeah, Fl. 33012

7. Name and Address of Current Registered Agent

Name:

Street Address (P.O. Box Number is Not Acceptable): 640 NW 36th. Ct. # D

City: Miami, Fl. FL Zip Code: 33125

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 _____ DATE

(Signature, typed or printed name of registered agent and date required.)

| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐ | January 1 - May 1 Fee is $150.00<br>After May 1, Fee is $550.00<br>Amended UBR is $61.25<br>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 D<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | RODRIGUEZ, MIGUEL I.<br>1183-C West 29th Street<br>Hialeah, Fl. 33012 | TITLE STD<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | RODRIGUEZ, MIGUEL I.<br>640 NW 36th. Ct.D<br>Miami, Fl. 33125 XChange |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | | TITLE PD<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MORENO, LILIANA M.<br>14956 SW 75 Terrace<br>Miami, fl. 33193 X Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | | TITLE VD<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MORENO, EDUARDO<br>14956 SW 75 Terrace<br>Miami, Fl. 33193 X Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | | TITLE<br>NAME<br>STREET ADDRESS<br>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 electronic 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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Vice-Pres.

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) DATE

CR2E034B (12/01)