2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 06, 2005 08:00 AM Secretary of State DOCUMENT # P99000072179. 1. Entity Name APL CORPORATION Mailing Address Principal Place of Business 1518 BLUE ROAD 1518 BLUE ROAD MIAMI, FL 33146 MIAMI, FL 33146 No Chg-P CR2E034 (10/03) 02012005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0939765 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE PAZOS, ANDRES 1518 BLUE ROAD MIAMI, FL 33146 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PAZOS, ANDRES NAME STREET ADDRESS 1518 BLUE RD. CITY-ST-ZIP CORAL GABLES, FL 33146 TITLE PAZOS, GRECIA NAME STREET ADDRESS 1518 BLUE RD. CITY-ST-ZIP CORAL GABLES, FL 33146 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME. STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 10 or Block 11 if

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