

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H01377

**FILED  
Jan 09, 2007  
Secretary of State**

**Entity Name:** UNITED APPRAISAL GROUP, INC.

**Current Principal Place of Business:**

3079 NE 183RD LN  
AVENTURA, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

3079 NE 183RD LN.  
AVENTURA, FL 33160

**New Mailing Address:**

**FEI Number:** 59-2415249      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DADE COUNTY CORPORATE AGENTS, INC.  
18901 NE 29TH AVENUE  
SUITE 100  
AVENTURA, FL 33180 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: KAPNER, ARLENE  
Address: 3079 NE 183RD LANE  
City-St-Zip: AVENTURA, FL 33160

Title: VP ( ) Delete  
Name: KAPNER, ARLENE  
Address: 3079 NE 183RD LANE  
City-St-Zip: AVENTURA, FL

Title: SEC ( ) Delete  
Name: KAPNER, ARLENE  
Address: 3079 NE 183RD LANE  
City-St-Zip: AVENTURA, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARLENE KAPNER

PRES

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date