

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000038614 (1)**

1. Corporation Name

A.S.A.P. APPRAISAL SERVICES, INC.

Principal Place of Business

Mailing Address

**8520 N.W. 51ST ST.
LAUDERHILL FL 33351**

**8520 N.W. 51ST ST.
LAUDERHILL FL 33351**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/23/1994	
21 11911 N.W. 2nd Street	26 same	4. FEI Number 65-0506287		☐ Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
22	27	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
City & State		City & State			
23 Coral Springs, FL	28				
Zip	Country	Zip	Country		
24 33071	25	29	30		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
FOLINO, ROBERT A 8520 N.W. 51ST ST. LAUDERHILL FL 33351				81 Name same	
				82 Street Address (P.O. Box Number is Not Acceptable) 11911 N.W. 2nd Street	
				83	
				84 City Coral Springs FL 85 Zip Code 33071	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

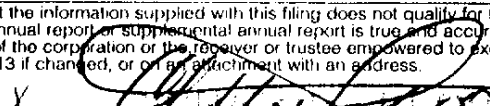
Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☒ Change ☐ Addition
NAME	FOLINO, ROBERT A	1.2 NAME	
STREET ADDRESS	8520 N.W. 51ST ST.	1.3 STREET ADDRESS	11911 N.W. 2nd Street
CITY-ST-ZIP	LAUDERHILL FL 33351	1.4 CITY-ST-ZIP	Coral Springs, FL 33071
TITLE	V	2.1 TITLE	☒ Change ☐ Addition
NAME	MARTINEZ, CARMEN	2.2 NAME	
STREET ADDRESS	8520 N.W. 51ST ST.	2.3 STREET ADDRESS	11911 N.W. 2nd Street
CITY-ST-ZIP	LAUDERHILL FL 33351	2.4 CITY-ST-ZIP	Coral Springs, FL 33071
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 

3/13/98 954255-5128

CR2E034 (10/97)