

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006883

FILED  
Jan 07, 2008  
Secretary of State

**Entity Name:** INSPECTION AND VALUATION INTERNATIONAL, INC.

**Current Principal Place of Business:**

55 WEST RED OAK LANE  
WHITE PLAINS, NY 10604

**New Principal Place of Business:**

6303 BLUE LAGOON DRIVE  
140  
MIAMI, FL 33126

**Current Mailing Address:**

55 WEST RED OAK LANE  
WHITE PLAINS, NY 10604

**New Mailing Address:**

**FEI Number:** 14-1557231

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: CP ( ) Delete  
Name: DE STEFANIS, CARL  
Address: 55 WEST RED OAK LANE  
City-St-Zip: WEST HARRISON, NY 10604

Title: CV ( ) Delete  
Name: DE STEFANIS, T. MARIO JR.  
Address: 55 WEST RED OAK LANE  
City-St-Zip: WEST HARRISON, NY 10604

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

Title: PSC (X) Change ( ) Addition  
Name: DE STEFANIS, CARL  
Address: 55 WEST RED OAK LANE  
City-St-Zip: WEST HARRISON, NY 10604

Title: VTD (X) Change ( ) Addition  
Name: DE STEFANIS, T. MARIO JR.  
Address: 55 WEST RED OAK LANE  
City-St-Zip: WEST HARRISON, NY 10604

I hereby certify that the information supplied with this filing does not qualify 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: CARL N. DE STEFANIS

PRES

01/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date