2002 UNIFORM BUSINESS REPORT (UBR)

Jul 15, 2002 8:00 am Secretary of State DOCUMENT # H14928 1. Entity Name 07-15-2002 90189 048 ***150.00 EXECUTIVE APPRAISAL SERVICE, INC. Principal Place of Business Mailing Address 1601 N. PALM AVE #307 1601 N. PALM AVE #307 PEMBROKE PINES FL 33026 PEMBROKE PINES FL 33026 2. Principal Place of Business 3. Mailing Address 601 N. DAM ANT Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE ity & State 4. FEI Number Applied For 59-2464790 Not Applicable Countr \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHAMBO, JAMES E. Street Address (P.O. Box Number is Not Acceptable) 11380 LAKESHORE DR COOPER CITY FL 33026 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ■ Addition NAME SHAMBO, JAMES E. NAME STREET ADDRESS 11380 LAKESHORE DR STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33026 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME SHAMBO, TERRI L. NAME STREET ADDRESS 11380 LAKESHORE DR STREET ADDRESS CITY-ST-ZIP COOPER CITY FL 33026 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TIT! F ☐ Change ☐ Addition NAME

13. Thereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FILED

AHaChment

July 9, 2002

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Florida Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Executive Appraisal Services, Inc.

Document #H14928

1601 N. Palm Ave., Suite 304F Pembroke Pines, Florida 33026

To Whom It May Concern:

Please be advised that Executive Appraisal has relocated as of January 1, 2001. We did not receive the first notice requiring payment for May 1, 2001. In fact, we did not receive the second notice until July 2, 2002. The only reason we received the notice is that the tenant in our old office was able to send us the report. I spoke with someone in your office today who said to send a letter explaining why we did not receive the report and that the late fee would be waived.

I have changed the address on the report to reflect the new address and if you check your records, we have been timely for the past 18 years. Thank you for your prompt attention to this matter.

Sincerely,

James E. Shambo

President