


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 16, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J12139</b> 1. Entity Name <b>NATIONAL VALUATION SERVICES OF FLORIDA, INC.</b>	
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Principal Place of Business 1900 NW CORPORATE BLVD STE 400E BOCA RATON, FL 33431 US	Mailing Address 1900 NW CORPORATE BLVD STE 400E BOCA RATON, FL 33431 US
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**DO NOT WRITE IN THIS SPACE**



07102004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-2705228</b>	Applied Fee Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  HILLER, SIDNEY P. 1900 NW CORPORATE BLVD STE 400E BOCA RATON, FL 33431	<b>DO NOT WRITE IN THIS SPACE</b>
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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.

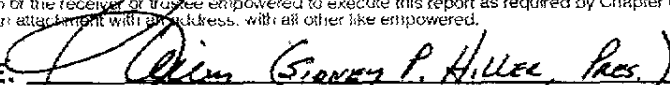
SIGNATURE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PS HILLER, SIDNEY P. 1900 NW CORPORATE BLVD STE 400E BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY ST ZIP	D SCRIVENS, R. H., JR. 1900 NW CORPORATE BLVD STE 400E BOCA RATON, FL 33431
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07/16/04-80004-014 150.00

12. 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 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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **7/16/04 (561) 988-6890**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR