

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00742

1. Entity Name

APPRAISAL GROUP INTERNATIONAL, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90068 039 ***158.75

Principal Place of Business 111 N.W. 183 STREET. STE 350 SUITE 518 MIAMI FL 33169 US	Mailing Address 111 N.W. 183 STREET. STE 350 SUITE 518 MIAMI FL 33169-4580 US
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2. Principal Place of Business 17 NW 168 Street	3. Mailing Address 17 NW 168 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Miami, FL	City & State Miami, FL
Zip 33169	Country U.S.A.

4. FEI Number 65-0129682	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

SCHMACHTENBERG, LEE C
1533 SUNSET DR.
#201
MIAMI FL 33143

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ FL 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRADBURY, RICHARD 111 N.W. 183 ST. MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C BRADBURY, RICHARD M. 17 NW 168 St. Miami, FL 33169 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KEVIN A. RAPCZYNSKI 17 NW 168 St. Miami, FL 33169 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other lines empowered.

SIGNATURE: RICHARD M. BRADBURY 4/12/00 (305) 944-8811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

R ichard M. Bradbury

CR2E034 (9/99)