

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000018516

FILED
Oct 20, 2004
Secretary of State

Entity Name: CABALLERO APPRAISAL SERVICES & ASSOCIATES, INC.

Current Principal Place of Business:

1345 LINCOLN ROAD
SUITE 904
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1345 LINCOLN ROAD
SUITE 904
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 52-2137578 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CABALLERO, LUIS M
1345 LINCOLN ROAD
SUITE 904
MIAMI BEACH, FL 33139 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CABALLERO, LUIS M
Address: 1345 LINCOLN ROAD
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: CABALLERO, ELENA
Address: 2035 S.W. 84TH AVE.
City-St-Zip: MIAMI, FL 33155

Title: VPD () Delete
Name: CABALLERO, JUAN
Address: 2035 SW 84TH AVE.
City-St-Zip: MIAMI, FL 33155

Title: SD () Delete
Name: CABALLERO, LUIS G
Address: 2035 SW 84TH AVE.
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUIS A CABBALLERO

PO

10/20/2004

Electronic Signature of Signing Officer or Director

_____ Date