

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000035635

FILED
Sep 03, 2005
Secretary of State

Entity Name: LESA'S PROPERTY APPRAISERS INC

Current Principal Place of Business:

5815 NW ZENITH DR.
8404 CORAL LAKE WAY # 12
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

5815 NW ZENITH DR.
PORT SAINT LUCIE, FL 34986

Current Mailing Address:

5815 NW ZENITH DR.
8404 CORAL LAKE WAY # 12
PORT SAINT LUCIE, FL 34986

New Mailing Address:

5815 NW ZENITH DR.
PORT SAINT LUCIE, FL 34986

FEI Number: 65-1090865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, LESA
5815 NW ZENITH DR.
BLD 12
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

GONZALEZ, LESA PRESIDE
5815 NW ZENITH DR.
PORT SAINT LUCIE, FL 34986 US

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: LESA GONZALEZ

09/03/2005

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: P () Delete
Name: GONZALEZ, LESA
Address: 5815 NW ZENITH DR.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VP () Delete
Name: GONZALEZ, SALVADOR
Address: 5815 NW ZENITH DR.
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LESA GONZALEZ

P

09/03/2005

Electronic Signature of Signing Officer or Director

Date