2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000076728 1. Entity Name PRONTO APPRAISALS SERVICES, INC.



FILED Apr 24, 2006 08:00 AN Secretary of State

Principal Place of Business

7500 NW 25TH STREET

SUITE 200 MIAMI, FL 33122 Mailing Address

7500 NW 25TH STREET SUITE 200 MIAMI, FL 33122

DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CR2E034 (11/05) 04192006 No Chg-P 4. FEI Number Applied For

5. Certificate of Status Desired

65-0739222

\$8.75 Additional Fee Required

Daytime Phone #

Not Applicable

GONZALEZ, FRANK

7500 NW 25TH STREET **SUITE 200** MIAMI, FL 33122

DO NOT WRITE IN THIS SPACE

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						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-SY-ZIP	P GONZALEZ, FRANK 15052 SW 149 STREET MIAMI, FL 33196				000000533928 05/06/06-80141-023 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					03/00/08-80141-052 130*13	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				1.12		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					and the second s	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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						