## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000050928

Entity Name: MS APPRAISAL SERVICES, INC.

FILED May 31, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

1950 SW 69 AVENUE #103 PEMBROKE PINES, FL 33023

Current Mailing Address: New Mailing Address:

18160 NW 2ND AVE SUITE 3 MIAMI, FL 33169 US

FEI Number: 02-0591699 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIMON, MARLENE SIMON, MARLENE B
1950 SW 69 AVENUE #103
PEMBROKE PINES, FL 33023 US
PEMBROKE PINES, FL 33023 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: MARLENE B. SIMON 05/31/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: **PCFO** () Delete Title: PCFO SIMON, MARLENE Name: Name: SIMON, MARLENE B 1950 SW 69 AVENUE #103 1950 SW 69 AVENUE #103 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33023 City-St-Zip: PEMBROKE PINES, FL 33023

Title: V () Delete Title: () Change () Addition

 Name:
 TORRES, MICHAEL A. S
 Name:

 Address:
 1950 SW 69 AVENUE #103
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33023
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARLENE B. SIMON PCEO 05/31/2007