

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008 8:00 am
Secretary of State

05-22-2008 90016 015 ***150.00

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05142008 Chg-P CR2E034 (12/06)

DOCUMENT # P02000073657 1. Entity Name FERRER'S APPRAISERS, INC.					
Principal Place of Business 13255 S.W. 137TH AVE. SUITE 207 MIAMI, FL 33186			Mailing Address 13255 S.W. 137TH AVE. SUITE 207 MIAMI, FL 33186		
2. Principal Place of Business, No P.O. Box # 15715 S. Dixie Hwy			3. Mailing Address 		
Suite, Apt. #, etc. Suite 213			Suite, Apt. #, etc. 		
City & State Palmetto Bay FL			City & State 		
Zip 33150		Country USA		4. FEI Number 22-3856529	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent GONZALEZ, YAIMA 14155 SW 148 CT MIAMI, FL 33196				7. Name and Address of New Registered Agent Name 	
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.				Street Address (P.O. Box Number is Not Acceptable) 	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>				Date _____ <small>Date</small>	
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PS	NAME FERRER, JAVIER		<input type="checkbox"/> Delete		
STREET ADDRESS 14155 SW 148 CT	CITY - ST - ZIP MIAMI, FL 33196		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Delete		
STREET ADDRESS 	CITY - ST - ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Delete		
STREET ADDRESS 	CITY - ST - ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Delete		
STREET ADDRESS 	CITY - ST - ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE 	NAME 		<input type="checkbox"/> Delete		
STREET ADDRESS 	CITY - ST - ZIP 		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address with all other like empowered.					
SIGNATURE:			Date: 05-19-08		
DAYTIME PHONE: 786-2825415			SIGNATURE OF SIGNING OFFICER OR DIRECTOR: Javier Ferrer		