

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000119522		
1. Entity Name APPRAISAL RESEARCH CENTER, INC.		

FILED

09 JAN 20 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 14570 SW 136TH ST STE 106 MIAMI, FL 33186	Mailing Address 14570 SW 136TH ST STE 106 MIAMI, FL 33186
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2. Principal Place of Business - No P.O. Box # 8100 SW 81st Dr Suite, Apt. #, etc. 250 City & State Miami, FL Zip 33143 Country USA		3. Mailing Address 8100 SW 81st Dr Suite, Apt. #, etc. 250 City & State Miami, FL Zip 33143 Country USA	
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01142009 REIN-P CR2E098 (1/07)

4. FEI Number 30-0144772		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GUARCH, J.M. JR 710 SOUTH DIXIE HWY CORAL GABLES, FL 33146	
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7. Name and Address of New Registered Agent Name Julio Garcia Street Address (P.O. Box Number is Not Acceptable) 8100 SW 81 Dr #250 City Miami FL Zip Code 33143	
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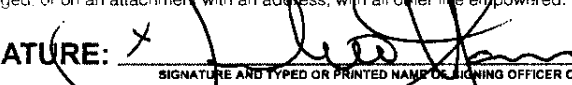
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 1/15/09

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST GARCIA, JULIO 2550 SW 27TH AVE APT 705 MIAMI, FL 33133 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Julio Garcia 8100 SW 81 Dr #250 Miami, FL 33143 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lee Smalley 8100 SW 81 Dr #250 Miami, FL 33143 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Luis Leonard 8100 SW 81 Dr #250 Miami, FL 33143 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

REINSTATEMENT
RH

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: 1/15/09 DAYTIME PHONE: 305-273-6540