


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 16, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000127406</b> 1. Entity Name <b>MAJOR APPRAISALS INC.</b>	
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Principal Place of Business <b>2638 W 28TH STREET RIVIERA BEACH, FL 33404</b>	Mailing Address <b>2638 W 28TH STREET RIVIERA BEACH, FL 33404</b>
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**DO NOT WRITE IN THIS SPACE**



02132004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>27-0044194</b>	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**COOK, MELVIN  
3700 MAX PLACE  
APT. 101  
BOYNTON BEACH, FL 33436**

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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 the applicant (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>000000053018 02/16/04-80113-022 158.75</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCEO MAJOR, MAURICE 2638 W 28TH STREET RIVIERA BEACH, FL 33404</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MAJOR, MAURICE 2638 W 28TH STREET RIVIERA BEACH, FL 33404</b>
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12. I hereby certify that the information supplied with this filing does not qualify 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 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:**  **2/13/04 (56) 882-0989**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #