

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004036

FILED  
Jan 13, 2005  
Secretary of State

Entity Name: CERTIFIED APPRAISALS, INC.

**Current Principal Place of Business:**

11811 SW 35 STREET  
MIAMI, FL 33175

**New Principal Place of Business:**

P.O. BOX 650816  
MIAMI, FL 33265

**Current Mailing Address:**

11811 SW 35 STREET  
MIAMI, FL 33175

**New Mailing Address:**

P.O. BOX 650816  
MIAMI, FL 33265

FEI Number: 20-0137078

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VIGO, RAFAEL A  
11811 SW 35 STREET  
MIAMI, FL 33175 US

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

VIGO, RAFAEL A  
P.O. BOX 650816  
MIAMI, FL 33265 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: \_\_\_\_\_

01/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: VIGO, RAFAEL A  
Address: 11811 SW 35 STREET  
City-St-Zip: MIAMI, FL 33175

Title: VS ( ) Delete  
Name: VIGO, RAFAEL A  
Address: 11811 SW 35 STREET  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: VIGO, RAFAEL A  
Address: P.O. BOX 650816  
City-St-Zip: MIAMI, FL 33265

Title: VS (X) Change ( ) Addition  
Name: VIGO, RAFAEL A  
Address: P.O. BOX 650816  
City-St-Zip: MIAMI, FL 33265

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAFAEL A VIGO

PT

01/13/2005

Electronic Signature of Signing Officer or Director

Date