2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004
Secretary of State

DOCUMENT# P03000004794

Entity Name: FLORIDA CERTIFIED APPRAISAL, INC.

Current Principal Place of Business:

250-174 STREET
STE 810
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

3411 SANTA BARBARA BLVD
CAPE CORAL, FL 33914

Current Mailing Address:

250-174 STREET
STE 810
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

3411 SANTA BARBARA BLVD
CAPE CORAL, FL 33914

FEI Number: 35-2193536 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMARO, NELSON
250-174 STREET
STE 810
SUNNY ISLES BEACH, FL 33160

Name and Address of New Registered Agent:

AMARO, NELSON
3411 SANTA BARBARA BLVD
CAPE CORAL, FL 33914

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: NELSON AMARO 02/26/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: AMARO, NELSON
Address: 250-174 STREET
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D ( ) Delete
Name: AMARO, NELSON
Address: 250-174 STREET
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: AMARO, NELSON
Address: 3411 SANTA BARBARA BLVD
City-St-Zip: CAPE CORAL, FL 33914

Title: D (X) Change ( ) Addition
Name: AMARO, NELSON
Address: 3411 SANTA BARBARA BLVD
City-St-Zip: CAPE CORAL, FL 33914

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: NELSON AMARO PRES 02/26/2004
Electronic Signature of Signing Officer or Director Date