2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000110560

Entity Name: ABS APPRAISAL SERVICES, INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

901 W. TRAPNELL RD. 901 W. TRAPNELL RD. PLANT CITY, FL 33567 PLANT CITY, FL 33566

Current Mailing Address: New Mailing Address:

P.O. BOX 4684 PLANT CITY, FL 33563

FEI Number: 06-1709325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITH, BETTY J GOMEZ, SYLVIA
5004 C.P. KEEN RD. 901 W. TRAPNELL ROAD
PLANT CITY, FL 33567 US PLANT CITY, FL 33566 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: SYLVIA GOMEZ 04/14/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 SMITH, BETTY
 Name:
 GOMEZ, SYLVIA

 Address:
 5004 C.P. KEEN ROAD
 Address:
 901 W. TRAPNELL ROAD

 City-St-Zip:
 PLANT CITY, FL 33567
 City-St-Zip:
 PLANT CITY, FL 33566

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 GOMEZ, SYLVIA
 Name:
 GOMEZ, ALFRED

 Address:
 901 W. TRAPNELL ROAD
 Address:
 901 W. TRAPNELL ROAD

 City-St-Zip:
 PLANT CITY, FL 33567
 City-St-Zip:
 PLANT CITY, FL 33566

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: SYLVIA GOMEZ P 04/14/2005