

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000044054

FILED
Apr 21, 2009
Secretary of State

Entity Name: FLORIDA REAL ESTATE PROPERTY APPRAISERS, INC .

Current Principal Place of Business:

2679 TIGERTAIL AVENUE
STE C
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

1825 PONCE DE LEON BLVD
#402
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-0968879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALFONSO, JUAN
2679 TIGERTAIL AVENUE
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALFONSO, JUAN
Address: 2679 TIGERTAIL AVENUE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: REYES, CARLOS G
Address: 690 SW 1 COURT #2516
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: REYES, CARLOS G
Address: 1825 PONCE DE LEON BLVD #402
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CARLOS REYES

D

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date