

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 26, 2005
Secretary of State**

DOCUMENT# P04000050836

Entity Name: OUTLOOK REAL ESTATE APPRAISALS, INC

Current Principal Place of Business:

15410 SW 47 STREET
MIAMI, FL 33185

New Principal Place of Business:

Current Mailing Address:

15410 SW 47 STREET
MIAMI, FL 33185

New Mailing Address:

FEI Number: 41-2131100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORTORA, LISSETTE
9241 SW 11 STREET
MIAMI, FL 33185 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAGEYRE, ANDRE
Address: 15410 SW 47 STREET
City-St-Zip: MIAMI, FL 33185

Title: VP () Delete
Name: TORTORA, LISSETTE
Address: 15410 SW 47 STREET
City-St-Zip: MIAMI, FL 33185

Title: T () Delete
Name: LAGEYRE, ANDRE
Address: 15410 SW 47 STREET
City-St-Zip: MIAMI, FL 33185

Title: S () Delete
Name: TORTORA, LISSETTE
Address: 15410 SW 47 STREET
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: LAGEYRE, ANDRE
Address: 15410 SW 47 STREET
City-St-Zip: MIAMI, FL 33185

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

Title: S (X) Change () Addition
Name: LAGEYRE, ANDRE
Address: 15410 SW 47 STREET
City-St-Zip: MIAMI, FL 33185

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: ANDRE LAGEYRE

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date