2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 06, 2005 8:00 am Secretary of State

DOCUMENT # P0400091884 1. Entity Name ACCU INSPECTION & APPRAISAL SERVICES, INC.							05-06-2005 90083 030 ***150.00				
Principal Place of Business Mailing Address											
835 NW 72 STREET Miami, Fl 33150-3614				835 NW 72 STREET Miami, FL 33150-3614							
								I BENDERHAN BENDERAN BENDER			II a d i ri r i e i
2. Principal Place of Business				Mailing Address							
Suite, Apt. #, etc.			<u>P</u>	P 0 BOX 470085 Suite, Apt. #, etc.			-	<u> </u>			
00				Ch. 4 Chur			05032005	Chg-P	CR2E034	`, ,	
City & State			M	City & State MIAMI, FL.			4. FEI Number Applied For 04-3794100 Not Applicable				
Zip	Zip Country		1	Zip	Cour	ntry	5 Certificate of Status Desired Stat				
6. Name and Address of Current F				33247 IISA pistered Agent			7. Name and Address of New Registered Agent				
MARTINE				Name							
MARTINEZ, ORLANDO 835 NW 72 STREET						Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL 33150-3614											
\wedge						City Zip Code					
R. The shove paredienting sharite this standard for the purpose of changing in an inter-						r					
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE FILES UTLE											
Signature (typed or prifed name of registered agent and tille if applicable. (NOTE: Registered Agent signature recuired when reinstating) DATE											
FILE NOWILL ESE IS \$150.00 Due by September 7, 2005 9. Election Campaign Finant Trust Fund Contribution.							i.00 May Be · ded to Fees	In accordance w corporation did r	rith s. 607.1 not receive t	93(2)(b), the prior r	F.S., the notice.
10.		OFFICERS AND	CTORS 11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME	DP Delete TIT					1			[Change	☐ Addition
STREET ADDRESS	ADDRESS 835 NW 72 STREET				EET ADDRESS						
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CITY-ST-ZIP				<u> </u>		-ST-21P					
TITLE Name				☐ Delete	TITL				C	Change	Addition
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12. I hereby certify that the information subdited with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplier entails the part is true and document and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the deceiver of trutted entoyevered to be executed this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addless, with all other like empowered.											
of the corporation or the feceiver of trustee encowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attagramment with any addless, with all other like empowered.											

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR