## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117255

Entity Name: AUTHENTIC APPRAISAL SERVICES INC.

FILED Apr 14, 2005 Secretary of State

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

6001 N.W. 153RD STREET 6165 MIAMI LAKES DRIVE SUITE 150 MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

6001 N.W. 153RD STREET 6165 MIAMI LAKES DRIVE SUITE 150 MIAMI LAKES, FL 33014 MIAMI LAKES, FL 33014

FEI Number: 20-1520339 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:

 CID, MABEL
 6001 N.W. 153RD STREET
 6165 MIAMI LAKES DRIVE

 150
 MIAMI LAKES, FL 33014 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: 04/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: CID, MABEL Name: CID, MABEL

 Address:
 6001 N.W. 153RD STREET, SUITE 150
 Address:
 6165 MIAMI LAKES DRIVE

 City-St-Zip:
 MIAMI LAKES, FL 33014
 City-St-Zip:
 MIAMI LAKES, FL 33014

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: MABEL CID D 04/14/2005