## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Secrétary of State DOCUMENT # P05000060957 07-28-2006 90033 024 \*\*\*158.75 1. Entity Name ANYTIME APPRAISALS, INC. Principal Place of Business Mailing Address 40101220 551 NE 5TH STREET 551 NE 5TH STREET POMPANO BEACH, FL 33060 US POMPANO BEACH, FL 33060 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07192006 · Chg-P CR2E034 (11/05) City & State City & State 4. EEI Number Applied For 20*-273386*6 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUEZ, MIMI Street Address (P.O. Box Number is Not Acceptable) 551 NE 5TH STREET POMPANO BEACH, FL 33060 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be $\Box$ Trust Fund Contribution. Due by September 6, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. P. D ☐ Addition TITI F ☐ Delete Change TITLE RODRIGUEZ, MIMI NAME NAME STREET ADDRESS 551 NE 5TH STREET STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33060 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all officers.

FILED Jul 28, 2006 8:00 am

Daytime Phone #

## ATTACHMENT

July 24, 2006

To: Florida Department OF State

From: Anytime Appraisals, Inc. 551 NE 5<sup>th</sup> Street
Pompano Beach, FL 33060

Dear Sir/Madam,

This letter is in response to the 2006 Annual report requiring to be sent to your office by May 2006.

This is to officially notify you that we did not received our notice for our 1<sup>st</sup> annual report. Enclose is the annual report sent by your office completed. An attempt was made via the internet.

Thank you for your assistance in this matter.

Sincerely yours,

Mimi N. Rodriguez