2008 FOR PROFIT CORPORATIONS ANNUAL REPORT

FILED Jan 24, 2008 08:00 Al tate

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DOCUMENT # P05000090553					, and a	secre	tary of Si
1. Entity Name INDEPENDENT APPRAISAL INVESTMENT INC.							
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	ce of Business	Mailing Address					
480 WEST 3 HIALEAH, FL		480 WEST 33 ST HIALEAH, FL 33012					
111111111111111111111111111111111111111	. 55512	THE WAY TO SEE THE SEE		(91 87101 B (81 8711/ BB (1) 8 9 111		THE THE THE THE
							
DO NOT WRITE IN THIS SPACE				01222008	No Chg-P	CR2E034	l (11/05)
			CF				Applied For
-)		-	4. FEI Numb			Not Applicable
				5. Certificate	e of Status Desired		8.75 Additional e Required
	6. Name and Address of Current Re	gistered Agent		·			
RODRIGUEZ, FELIPE L				· DO	NOT W	DITE	
480 WEST 33 ST			DO NOT WRITE				
HIALEAH, FL 33012				IN .	THIS SP	ACE	
8. The above	named entity submits this statement for th	ne purpose of changing its register	red office or registe	red agent, or bo	oth, in the State of Flor	ida. I am far	niliar with, and accept
	tions of registered agent.	, , , , , ,	•	-			
SIGNATURE			7. 7			0.175	
	Signature, lyped or printed name of registered agent and	title if applicable (NOTE: Registers	ed Agent signature required	d when reinstaling)	<u> </u>	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.	ncing \$5	.00 May Be led to Fees			
10.	OFFICERS AND DI	RECTORS	1		I		
TITLE	PTS						
NAME STREET ADDRESS	RODRIGUEZ, FELIPE L 480 WEST 33 ST		Ī				
CITY-ST-ZIP	HIALEAH, FL 33012						
TITLE		·	-		######################################	792715	ነፋው ቀጠው ውብ -
NAME					017 24 70671	20019-C	018 120.00
STREET ADORESS CITY-ST-ZIP			•				
TITLE			1				
NAME			1				
STREET ADDRESS				DΩ	NOT W	RITE	
CITY-ST-ZIP			-]				
TITLE NAME				IN .	THIS SP	ACE	

12. Thereby 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 other like empowered.

SIGNATURE;

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

AAME OF SIGNING OFFICER OR DIRECTOR