2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000042625

City-St-Zip:

SUNRISE, FL 33323

Entity Name: SOUTH EAST SCHOOL OF AUTO APPRAISING INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	106 WAY SPRINGS, FL 3	33076			
Current Mailing Address:			New Mailing Address:		
5030 NW CORAL S	106 WAY SPRINGS, FL 3	33076			
FEI Number	: 20-8699447	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:	
1580 SAW		P. PKY. SUITE 130 US			
	e named entity e of Florida.	submits this statement for the բ	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electror	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CARAVELLA, C	SS CORP. PKY. SUITE 130	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GILMARTIN, HI	SS CORP.PKY. SUITE 130	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CARAVELLA, D	SS CORP. PKY. SUITE 130	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	CARAVELLA, N	Delete NCHELLE SS CORP. PKY. SUITE 130	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

City-St-Zip:

SIGNATURE: HELEN GILMARTIN VPR 04/30/2008