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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	P93000011049	(2)

FIRST CHOICE APPRAISAL SERVICES, INC.

Principal Place of Business Mailing Address 2100 W 76 ST 2100 W 76 ST STE 312 STE 312 HALEAH FL 33016-5500 HIALEAH FL 33016 US UŜ 3. Date Incorporated or Qualified 3a. Date of Last Report 02/04/1993 04/29/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0398376 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Country This corporation has liability for intangible tex under s. 199.032, 9. Name and Address of Current Registered Agent Yes 30 Florida Statutes 10. Name and Address of New Registered Agent 81 Name BROMFIELD, FRANSICO C 2100 W 76 ST Street Address (P.O. Box Number is Not Acceptable) **STE 312** 83 HIALEAH FL 33016 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. FRMUS100 BROMFICED OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. DELETE Change Addition 1.1 TITLE TITLE BROMFIELD, FRANSICO C NAME 1.2 NAME CRZE034 W: 76 STRAFT 2100 W 76 ST #312 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 1.4 CHTY-ST-ZIP CITY - ST - 7IP 2.1 TITLE DV DELETE THILE ROSE, WAYNE B 22 NAME NAME 2100 W 76 ST #312 2.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 2. 4 CITY-ST-ZIP CHY-SI-ZIE Addition DELETE 3 1 TITLE THEF NAM: 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 011Y - 51 - 7/P

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3M) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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

4.1 TITLE

4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CiTY+ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

DILE

NAME

TITLE

NAM

TITLE

NAME

STREET ADORESS

STREET ADDRESS COLY-ST-ZP

STREET ADDRESS CITY+ST-ZIP

CHY-ST-ZIP

TRINUSICO GROM FECO YES

DELETE

DELETE

DELETE

305-558-050/

Change

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Addition

Addition

Addition

FILED

May 02 1997 8:00am

Secretary of State

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