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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED Apr 23 1996 8:00 am Secretary of State

1996

DOCUMENT #

1. Corporation Name

P93000022824 (5)

RELIABLE APPRAISING AND REAL ESTATE SERVICES, IN

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Principal Place	e of Business	Mailir	ng Address		* ***	I ADE/IDEN AND CENDE HINT EDIAN BOIN			JH 8181 1881
307 TEQUES #101B TEQUESTA F US		#10 TEC	307 TEQUESTA DR. #101B TEQUESTA FL 33469 US			Date incorporated or Qualified			
						03/22/1993		3a. Date of Last Report 03/20/1995	
2. Principal Pl	lace of Business	F1	ating Address	7.1.		4. FEI Number			plied For
Suite, Apt	#, etc	26 S	iite, Apt. #, etc			65-0397502			ot Applicable
22		27				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State	e	C	ty & State			6. Election Campaign Financing		\$5.00	· <u>-</u>
23 Zin		28				Trust Fund Contribution		Added t	
Zip 24	Country 25	71	p	Coun	try	8. This corporation has liability for		unders 1	99.032,
**	9. Name and Address of Cu	29 Irrent Register	ed Agent	30		Florida Statutes Yes 10. Name and Address of New R	□ No		
					Name	To. Name and Address of New H	egistered Ag	ent	
WILSON	I, Christopher								
421 4TH	I COURT				Street Add	dress (P.O. Box Number is Not Acceptab	le)		
Palm bi	EACH GARDENS FL 33410			Ε	33		-		
				l l	34 City				
							-	85 Zp C	
 Parsgant t or register 	to the provisions of Sections 607.0 red agent, ochoth, in the State of R	1502 and 607.1: Jorda, Suct. et	508, Florida Statute	es the above	e named corpo	oration substrits this statement for the pur		ing its reg	istered office
familiar wit	th, and accept the oblightens of S	Section 607.060	5, Florida Statutes	earby the co	трогавон в цо	oration subtrits this statement for the pur ard of directors. Thereby accept the appo	antment as reg	ýistered aq	jent Lam
SIGNATURE	Signature typed of printed having of requirement,			_ UW₁	ABOLEAN	en William	4-1	1B-PI	6
12.		AND DIRECTO		Et Feyistere (A, ■ 13.	des., editor, se traba	ADDITIONS/CHANGES TO OFFI	CIATE	DECTODO	2 (6) (7)
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oath, that I am an officer or director of this antition report or supplemental annual report is true and abcurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of thy corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Floridu Statutes, and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-86

407-575 5558