FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000079094 (7)

G & S APPRAISALS, INC. Principal Place of Business Mailing Address 4700 GAUCHO TRAIL 4700 GAUCHO TRAIL #CB103 #CB103 DO NOT WRITE IN THIS SPACE MIRAMAR FL 33027 MIRAMAR FL 33027 3. Date Incorporated or Qualified 11/16/1993 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0460704 21 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zιρ Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes SNo 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GUITIERREZ, TAYDI 4700 GAUCHO TRAIL Street Address (P.O. Box Number is Not Acceptable) **#CB103** MIRAMAR FL 33027 83 84 City Zip Code 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 corporation's board of directors. I hereby accept the appointment as registered agent. I am fartifular with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, great agent and into if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE CR2E034 (10/97 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE TITLE Change Addition **GUITTERREZ, GEORGE** 1.2 NAME 4700 GAUCHO TRAIL, #CB103 STREET ADDRESS 1.3 STREET ADDRESS MIRAMAR FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS CITY-ST-ZIP 2. 4 City-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS **3.3 STREET ADORESS** CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition 4.1 TOTLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE

6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing goes not qualify for the exemption stated in Section 119.07(3)(i), 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 feeding or trustee endowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an automorphism with any olders.

THE VALUE OF THE

62 NAME

6.3 STREET ADDRESS

SIGNATURE: >

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

May 01 1998 8:00am

Secretary of State