## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000032024  1. Entity Name ROSENTHAL APPRAISALS, INC.				
	ce of Business	- Mailing Address		
1640 IUWN 204	CENTER CIR.	1640 TOWN CENTER CIR. 204		
WESTON, FL	. 33326 ÚS	WESTON, FL 33326 US		
DO NOT WRITE IN THIS SPAC  6. Name and Address of Current Registered Agent				02032005 No Chg-P CR2E034 (10/03)   4. FEI Number   Applied For     65-0482669   Not Applicable     5. Certificate of Status Desired   \$8.75 Additional     Fee Required   Fee Required
ROSENTHAL, GAIL				DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent segnature required when reinstating)  DATE				
				5.00 May Be ded to Fees
10.		AND DIRECTORS		AND TO AMERICA
NAME	ROSENTHAL, GAIL	Cultric pos		
STREET ADDRESS CITY-ST-ZIP	1640 TOWN CENTER CIR., WESTON, FL 33326	SUITE 204		U00000217332
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSENTHAL, LEE 1640 TOWN CENTER CIR., WESTON, FL 33326	SUITE 204		U00000217332 02/07/05-80012-016 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TIYLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied 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 receivery further 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 princ like empowered.				
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR BIRECTOR Date Dayling Priors #				