PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUN 10 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000080877

1. Corporation Name
TOTAL APPRAISAL SERVICE CORP.
478 MACGREGOR ROAD
WINTER SPRINGS, FLORIDA 32708

2. Principal Office Address	3. Mailing Office Address
478 MACGREGOR ROAD	478 MACGREGOR ROAD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WINTER SPRINGS, FLORIDA	City & State: WINTER SPRINGS, FLORIDA
Zip: 32708 Country: SEMINOLE	Zip: 32708 Country: SEMINOLE

4. Date Incorporated or Qualified To Do Business in Florida: OCTOBER 18, 1995

5. FEI Number: 59-3350000 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: ANGEL M. MARENGO

Street Address (P.O. Box Number is Not Acceptable): 478 MACGREGOR ROAD

000056026930
06/10/05--01048--002 **300.00

Suite, Apt. #, Etc.:

City: WINTER SPRINGS, State: FL Zip Code: 32708

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: [signature] Date: MAY 25, 2005
REGISTERED AGENT MUST SIGN

CR2E081 (01/05)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	ANGEL M. MARENGO	478 MACGREGOR ROAD	WINTER SPRINGS, FL 32708
S/T	CARMEN MARENGO	478 MACGREGOR ROAD	WINTER SPRINGS, FL 32708

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: [signature] ANGEL M. MARENGO, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/25/05
Date

407-327-3970
Daytime Phone #

JULIO HERNANDEZ
TAX & NOTARY SERVICES
105 Bridle Court
Kissimmee, Florida 34743
Ph. & Fax No. (407) 348-6834

June 7, 2005

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Attn: **DARLENE**

RE: TOTAL APPRAISAL SERVICE CORP. DOCUMENT P95000080877

On behalf of Total Appraisal Service Corp., I am enclosing completed forms for the reinstatement of the corporation of reference and Money Order from SunTrust Bank #230968688 in the amount of $300.00.

Original forms for renewal of Annual Report were never received by this corporation.

I am taking this opportunity to thank you for your kindly help in this regard.

If any additional information is needed please do not hesitate to contact the undersigned.

Sincerely yours,

JULIO HERNANDEZ

JH/p
Encls.