

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90007 033 ***150.00

DOCUMENT # P96000002641

1. Corporation Name
THE VALUATION GROUP, INC.

Principal Place of Business

3250 MARY ST.
SUITE 103
COCONUT GROVE FL 33133

Mailing Address

3250 MARY ST.
SUITE 103
COCONUT GROVE FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/09/1996

4. FEI Number

65-0660261

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 2332 HOLLYWOOD BLVD.

Suite, Apt. #, etc.

22 SUITE 302

City & State

23 HOLLYWOOD, FL

Zip

24 33020

Country

25 BROWARD

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

27 HOLLYWOOD, FL

Zip

28 33020

Country

29 BROWARD

9. Name and Address of Current Registered Agent

FREEMAN, LEWIS B
3250 MARY STREET
SUITE 103
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME O'ROURKE, MICHAEL
STREET ADDRESS 3250 MARY ST., SUITE 103
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT / TREASURER ☒ Change ☐ Addition

1.2 NAME MICHAEL O'ROURKE

1.3 STREET ADDRESS 2332 HOLLYWOOD BLVD, SUITE 302

1.4 CITY-ST-ZIP HOLLYWOOD, FL 33020

2.1 TITLE VICE-PRESIDENT ☐ Change ☒ Addition

2.2 NAME LEWIS B. FREEMAN

2.3 STREET ADDRESS 3250 MARY ST, SUITE 103

2.4 CITY-ST-ZIP MIAMI FL 33133

3.1 TITLE SECRETARY ☐ Change ☒ Addition

3.2 NAME LYNN O'ROURKE

3.3 STREET ADDRESS 2332 HOLLYWOOD BLVD, SUITE 302

3.4 CITY-ST-ZIP HOLLYWOOD, FL 33020

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/99

325-443-6622

Date

Daytime Phone #

CR2E034 (11/98)