

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000020415

1. Entity Name
HI-TECH APPRAISALS, INC.



Principal Place of Business
9320 FOUNTAINBLEAU BOULEVARD
601
MIAMI, FL 33172

Mailing Address
9320 FOUNTAINBLEAU BOULEVARD
601
MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE

**FILED
May 01, 2006 8:00 am
Secretary of State**

05-01-2006 90386 039 ***150.00

400100



04282006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0648211	Applied For
	Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GONZALEZ, ELINA 9320 FONTAINEBLEAU BLVD APT 601 MIAMI, FL 33172

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or 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 signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS GONZALEZ, ELINA 9320 FONTAINEBLEAU BLVD #601 MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-06

Date

Daytime Phone #