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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000067717 (3) DOCUMENT

ATLANTIC APPRAISAL CONSULTANTS CORPORATION

FILED Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7231 MIAMI LAKES DRIVE. #C-7 7231 MIAMI LAKES DRIVE, #C-7 MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/05/1997 2, Principal Place of Business 2a. Mailing Address Applied For 5901 NW 151 STREET 26 5901 NW STREET 650776204 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired SUME Fee Required \$5.00 May Be 6. Election Campaign Financing LAKES Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RODRIGUEZ, ALBERT 7231 MIAMI LAKES DRIVE, #C-7 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI LAKES FL 33014 В3 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. Thereby accept the appointment as registered agent. Fam familiar with, and recognitions of, Section 607,0505, Florida Statutes. ALBERT KOBRIGUEZ SIGNATURE 12 D DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change PST Addition TITLE 1 1 TITLE RODRIGUEZ, ALBERT 1.2 NAME NAME 7231 MIAMI LAKES DRIVE, #C-7 1.3 STREET ADDRESS STREET ADDRESS MIAMI LAKES FL 33014 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE 21 TITLE Change Addition TIFLE NAME RODRIGUEZ, ALBERT 2 ? NAME 7231 MIAMI LAKES DRIVE, #C-7 STREET ADDRESS 2 3 STREET ADDRESS MIAMI LAKES FL 33014 CITY - ST - ZIP 2 4 CITY-ST-ZIP Tille DELLTE Change ☐ Addition 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-\$1-ZIP CITY - ST - ZIP TITLE DELETE 4 1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST ZIP 4.4 CiTY - ST - ZiP DELETE Change Addition TIFLE 51 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition 62 NAME NAME STREET ADDRESS 63 STREET ADDRESS 6 4 CITY - ST - ZIP

14. Thereby 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 fustee 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.

SIGNATURE:

ALBERT RODRIGUEZ

305-822-3002