2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# P97000090401

Entity Name: PRIORITY APPRAISALS, INC.

Current Principal Place of Business:

930 WASHINGTON AVENUE
SUITE 206
MIAMI BEACH, FL 33139

New Principal Place of Business:

300 ARTHUR GODFREY ROAD
SUITE 213
MIAMI BEACH, FL 33140

Current Mailing Address:

930 WASHINGTON AVENUE
SUITE 206
MIAMI BEACH, FL 33139

New Mailing Address:

300 ARTHUR GODFREY ROAD
SUITE 213
MIAMI BEACH, FL 33140

FEI Number: 65-0812434 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TWIST, GARY R
930 WASHINGTON AVENUE
SUITE 206
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

TWIST, GARY R
300 ARTHUR GODFREY ROAD
SUITE 213
MIAMI BEACH, FL 33140 US

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.

SIGNATURE: GARY R. TWIST 04/13/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete
Name: TWIST, GARY R
Address: 930 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete
Name: TWIST, GARY R
Address: 930 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: TWIST, GARY R
Address: 300 ARTHUR GODFREY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Change ( ) Addition
Name: TWIST, GARY R
Address: 300 ARTHUR GODFREY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY R. TWIST PRES 04/13/2005
Electronic Signature of Signing Officer or Director Date