2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 25, 2005 8:00 am Secretary of State 04-25-2005 90211 008 ***150.00 DOCUMENT # P98000023713 1. Entity Name ALL-IN-ONE APPRAISAL, CORP. Principal Place of Business Mailing Address 8900 S.W 107TH AVE 13780 SW 567A ST 8900 SW 107TH LUE. 13780 SW 567ff ST SUITE# 303 A #110 us Mani EL Miani, FL 33176 CR2E034 (10/03) 04182005 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0818983 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FONSECA, DANILO DO NOT WRITE 13780 SW 56TH ST 8900 SW 107TH AVENUE Guite #303A IN THIS SPACE MAMI, FL 33175 Hiami, FL 33176 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 Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Ø ► OFFICERS AND DIRECTORS 10. TILE FONSECA, DANILO NAME 8900 SW_107TH AVENUE STREET ADDRESS 13780 SW 56TH_ST-#110 CITY-ST-ZIP MIAMI: FL 33175 TITLE FONSECA, MARIA NAME 13780 SW 56TH ST #110 STREET ADDRESS MAMI. FL 33175 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. 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 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 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DANITO FONSECA (PresideNT)

FILED