

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 19 1996 8:00 am
Secretary of State

DOCUMENT # S34986 (7)

1. Corporation Name

AMERICAN INTERNATIONAL APPRAISERS & JOSEPH SHAI A
AUCTION CO.

Principal Place of Business

6329 ALL AMERICAN BLVD
ORLANDO FL 32810

Mailing Address

6329 ALL AMERICAN BLVD
ORLANDO FL 32810

3. Date Incorporated or Qualified
02/27/1991

3a. Date of Last Report
02/03/1995

2. Principal Place of Business

2a. Mailing Address

21 40 W. Colonial Drive

26 40 W. Colonial Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Orlando, FL

28 Orlando, FL

Zip

Country

24 32801

25 Orange

29 32801

30 Orange

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COOLEY, R EDWARD
1450 SR 434 W
SUITE 200
LONGWOOD FL 32750

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME ☐ DELETE

VP
SHAI A, JOSEPH
606 WATER OAK LANE
LONGWOOD FL

2. NAME ☒ DELETE

ST
ADAMS, CANDY L
PO BOX 843
CASSELBERRY FL

3. NAME ☐ DELETE

P
SHAI A, KATHLEEN
606 WATER OAK LN
LONGWOOD FL 32779

4. NAME ☐ DELETE

V
VAN LANDINGHAM, JAMES
214 ORIENTA POINT APT 214
ALTAMONTE SPRINGS FL

5. NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

6. NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

7. NAME ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

1. 1. TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2. 1. TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3. 1. TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4. 1. TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5. 1. TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6. 1. TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

ST ☒ Change ☐ Addition

COSIMATO, CANDACE C
549 W. KING ST
ORLANDO, FL

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *x*

Joseph Shaia, VP

2/13/96

(407)481-1035

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)