FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 9:18
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **V71376** (0)

1. Corporation Name
PRECISION APPRAISAL SERVICE, INC.

Principal Place of Business: 980 N FEDERAL HWY, SUITE 415, BOCA RATON FL 33432

Mailing Address: 980 N FEDERAL HWY, SUITE 415, BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/12/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0362801 — Applied For / Not Applicable
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 [X] Yes [ ] No

2. Principal Place of Business / 2a. Mailing Address
21 / 26 Suite, Apt. # etc. 22 / 27 City & State 23 / 28 Zip 24 County 25 / Zip 29 County 30

9. Name and Address of Current Registered Agent

SAVIANO, STEVEN J.
980 N FEDERAL HWY
SUITE 415
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name: Commercial Management Group, Inc.
82 Street Address (P.O. Box Number is Not Acceptable): 980 N. Federal Highway
83 Suite 415
84 City: Boca Raton, FL 85 Zip Code: 33432

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 Chapter 607, Florida Statutes.

SIGNATURE: Steven Saviano, Pres. Steven J. Saviano, President 4/29/95

12. OFFICERS AND DIRECTORS / **13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

12.		13.	
TITLE	D	TITLE	[X] Change [ ] Addition
NAME	SAVIANO, STEVEN J.	NAME	
STREET ADDRESS	17018 NEWPORT CLUB DRIVE	STREET ADDRESS	980 N. Federal Hwy., Suite 415
CITY-ST-ZIP	BOCA RATON FL	CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	DPT	TITLE	D [X] Change [ ] Addition
NAME	METANIAS, GEORGE A	NAME	
STREET ADDRESS	5790-A FOX HOLLOW DR.	STREET ADDRESS	980 N. Federal Hwy., Suite 415
CITY-ST-ZIP	BOCA RATON FL	CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	DVS	TITLE	D/P/V/S/T [X] Change [ ] Addition
NAME	SUBIN, NEIL	NAME	
STREET ADDRESS	2519 N OCEAN BLVD., APT 312 A	STREET ADDRESS	980 N. Federal Hwy., Suite 206
CITY-ST-ZIP	BOCA RATON FL	CITY-ST-ZIP	Boca Raton, FL 33432
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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(1)(k), Florida Statutes. I further certify that the information indicated on this 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: [signature] Pres. — 4/29/95 — (407) 750-9577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

Neil Subin, Pres.

0266384 CP