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FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT #
 1. Corporation Name **J09893**
LIGHTHOUSE POINT TITLE AND ESCROW COMPANY

Principal Place of Business: **225 N. FEDERAL HIGHWAY STE. 650 POMPANO BEACH, FL 333062 US**
 Mailing Address: **225 N. FEDERAL HIGHWAY STE. 650 POMPANO BEACH, FL 33062 US**

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified: **04/17/1986**

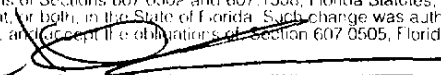
2. Principal Place of Business: **21 3343 W. COMM. BLVD. Suite, Apt. #, etc. 22 104 City & State 23 FORT LAUDERDALE, FL Zip 24 33309 Country 25**
 2a. Mailing Address: **26 3343 W. COMM. BLVD. Suite, Apt. #, etc. 27 104 City & State 28 FT. LAUDERDALE, FL Zip 29 33309 Country 30 U.S.A.**

4. FEI Number: **59-2658562** 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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent:
CYNTHIA H. CARAMEROS
3343 W. COMMERCIAL BLVD.
STE. 104
FORT LAUDERDALE, FL 33309

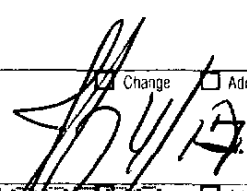
10. Name and Address of New Registered Agent:
 81 Name: **CYNTHIA H. CARAMEROS**
 82 Street Address (P.O. Box Number is Not Acceptable): **3343 W. COMM. BLVD.**
 83 **STE. 104**
 84 City: **FORT LAUDERDALE** FL 85 Zip Code: **33309**

11. Pursuant to the provisions of Sections 607.0602 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 I accept the obligations of, Section 607.0505, Florida Statutes.

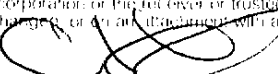
SIGNATURE:  **CYNTHIA H. CARAMEROS** DATE: **04/13/98**
Signature typed or printed name of registered agent (not applicable) (b)(3)(C) Registered Agent signature required when re-registering

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CYNTHIA H. CARAMEROS, PRES.	1.2 NAME	
STREET ADDRESS	3343 W. COMM. BLVD., STE. 104	1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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14. 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 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 in an attachment with an address.

SIGNATURE:  PRES/DIRECTOR (954) 484-7100
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)