

FILED
May 07, 2003 8:00 am
Secretary of State

05-07-2003 90173 012 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000080148					
1. Entity Name FIRST CORPORATE TITLE INC					
Principal Place of Business 16421 SW 103 TERR MIAMI, FL 33196 US			Mailing Address 16421 SW 103 TERR MIAMI, FL 33196 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 22-3884446				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GOMEZ, LOURDES 16421 SW 103 TERR MIAMI, FL 33196				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____					
FEE: \$150.00 After May 1, 2003, Fee will be \$550.00 Make Check payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
Delete ☒ RODRIGUEZ, HECTOR JR 16421 SW 103 TERR MIAMI, FL 33196			Change ☒ Addition ☐ President Lourdes Gomez 16421 SW 103 RD Terrace Miami FL 33196		
Delete ☐ S GOMEZ, LOURDES 16421 SW 103 TERR MIAMI, FL 33196			Change ☐ Addition ☒ Secretary Richard A. Montanez 16421 SW 103 RD Terrace Miami FL 33196		
Delete ☒ VP GOMEZ, GERARDO E 16421 SW 103RD TERRACE MIAMI, FL 33196			Change ☐ Addition ☐		
Delete ☐			Change ☐ Addition ☐		
Delete ☐			Change ☐ Addition ☐		
Delete ☐			Change ☐ Addition ☐		
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 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <u>Lourdes Gomez</u> (786) 299-3034 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

CR2E034 (10/02)