2008 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 27, 2006 08:00 AN Secretary of State DOCUMENT # P95000065979 M.G. TITLE SERVICES, INC. Mailing Address Principal Place of Business 8301 CORAL WAY 8301 CORAL WAY MIAMI, FL 33155 MIAMI, FL 33155 04062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3338415 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GONZALEZ, MARIA E DO NOT WRITE 8301 CORAL WAY MIAMI, FL 33155 IN THIS SPACE 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. (NOTE. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and fitte if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000540542 \Box Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 05/10/06-80023-001 OFFICERS AND DIRECTORS 10. **PVST** TITLE NAME GONZALEZ, MARIA E 8301 CORAL WAY STREET ADDRESS CITY - ST - ZtP MIAMI, FL 33155 TITLE GONZALEZ, MARIA E NAME 8301 CORAL WAY STREET ADDRESS MIAMI, FL 33155 CITY ST-78P TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CHY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and eccurate 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 attackment with an address, with all given like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS City-ST-ZIP HTLE NAME STREET ADDRESS CHY ST ZIP