

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000096496

FILED  
Feb 28, 2005  
Secretary of State

Entity Name: SOUTH FLORIDA TITLE CONSULTANTS, INC.

## Current Principal Place of Business:

13798 NW 4TH STREET  
300  
SUNRISE, FL 33325 US

## New Principal Place of Business:

13798 NW 4TH STREET  
309  
SUNRISE, FL 33325 US

## Current Mailing Address:

13798 NW 4TH STREET  
300  
SUNRISE, FL 33325 US

## New Mailing Address:

13798 NW 4TH STREET  
309  
SUNRISE, FL 33325 US

FEI Number: 20-1285451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KHAN, SHAZAD  
2997 MYRTLE OAK CIRCLE  
DAVIE, FL 33328 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MACHADO, CARLA MARINA  
Address: 19244 NW 12TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VPD (X) Delete  
Name: GONZALEZ, MARIA T  
Address: 3031 NW 162ND STREET  
City-St-Zip: MIAMI, FL 33054 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MACHADO, CARLA M  
Address: 19244 NW 12TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLA MACHADO

P

02/28/2005

Electronic Signature of Signing Officer or Director

Date