

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000069172

**Entity Name:** HARLEQUIN TITLE CORP

**Current Principal Place of Business:**

15201 N.W. 60 AVE  
MIAMI, FL 33014

**Current Mailing Address:**

15201 N.W. 60 AVE  
MIAMI, FL 33014 US

**FEI Number:** 45-2880250

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LANTIGUA, AMAURYS  
6921 MIAMI LAKEWAY S  
MIAMI LAKES, FL 33014 US

*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

**Officer/Director Detail :**

Title P  
Name LANTIGUA, AMAURYS  
Address 6921 MIAMI LAKEWAY S  
City-State-Zip: MIAMI LAKES FL 33014

Title VP  
Name LANTIGUA, DILDAIDA  
Address 15211 N.W. 60 AVE  
City-State-Zip: MIAMI LAKES FL 33014

*I hereby 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 all other like empowered.*

**SIGNATURE:** AMAURYS LANTIGUA

**PRESIDENT**

**01/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date