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

## F9400006394 **DOCUMENT #** 1. Entity Name TITLE MANAGEMENT COMPANY OF TEYAS



**FILED** Jul 07, 2003 8:00 am Secretary of State 07-07-2003 90308 046 \*\*\*550.00

TITLE IVIA	AVAGENIENT CONFANT OF	IEAAS	<b>V</b>				
Principal Place of Business 1868 N UNIVERSITY DRIVE #203 PLANTATION FL 33322 US 2. Principal Place of Business		Mailing Address 1868 N UNIVERSITY DRIVE #203 PLANTATION FL 33322 US 3. Mailing Address		,			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 76-0298460	Applier Not Ap	d For
Zip	Country	Zip	Coun	try		3.75 Addition	
	6. Name and Address of Current	  Registered Agent			7. Name and Address of New Registered Age		
				Name			
MATTHEW, KAYTON 2128 N BAY RD				Street Address (P.O. Box Number is Not Acceptable)			
MIAMI BEACH FL 33140					And the state of t		
				City	FL	Zip Code	
8. The above	named entity submits this statement for	r the purpose of changing	no its registere	ed office or registers	ed agent, or both, in the State of Florida. I am fam	iliar with, and	accept
	tions of registered agent.	parkana er errenign	· • · · · · · · · · · · · · · · · · · ·				
,§IGNATURE	Signature, typed or printed name of registered agent	and title if applicable	(NOTE: Registere	d Agent signature required	when reinstating) DATE		
4 Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	-			9. Election Campaign Financing Trust Fund Contribution.	<b>\$5.00</b> M Added to F	
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND D	RECTORS IN	11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP KAYTON, DAVID 2128 N BAY ROAD MIAMI BEACH FL 33140	☐ Delete		· I		Change (	Addition
TITLE	VS	☐ Delete	TITLE	:		Change [	Addition
NAME STREET ADDRESS CITY-ST-ZIP	Matthew, Kayton   2128 Bay Rd   Miami Beach Fl			E Et address -ST-Zip	•		
TITLE	٧	☐ Delete	TITLE	:		Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	MARK, KAYTON   10655 MEMORIAL DRIVE   HOUSTON TX 77024	**************************************		et address -ST-Zip			
TITLE NAME STREET ADDRESS	CFO JUSTISON, JAMES J 1868 N UNIVERSITY DR STE 203	☐ Delete		ET ADDRESS		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PLANTATION FL 33322	☐ Delete	TITLE NAME STREE			]'Change	] Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME			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 expect 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Daytime Phone #