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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT # G79297** 

(9)

1. Corporation Name U.S. TITLE SECURITY CO.  Principal Place of Business  Mailing Address  B. ROBERTSON COHEN 1870 FOREST HILL BLVD. #212 WEST PALM BEACH FL 33406 WEST PALM BEACH FL					<del>-</del>				
WEST PALM	BEACH FL 33	106	WEST PALM BEA	ICH FL 33406		3. Date Incorporated or Qualified	3a. Date		
2. Principal Pla	aco of Busines		2a Malling Addison			01/13/1984	04	/25/19	
21	ace or busines	5	2a. Mailing Address	S		4. FEI Number 59-2364 194			Applied For
Suite, Apt. a	#, etc.		Suite, Apt. #, et	tg.					Not Applicable  5 Additional
22			27			5. Certificate of Status Desired			Required
City & State	9		City & State			6. Election Campaign Financing		\$5.0	May Be
710		0	28			Trust Fund Contribution		Adde	d to Fees
Zip 24	2	_ Country ₌	Zip	Count	ry	8. This corporation has habitity for		x under s	199.032,
· <del>"</del>		nd Address of Current	29  t Registered Agent	30		Florida Statutes Yes  10. Name and Address of New F	No No	laeni	·-
				8	1 Name	TO. NAMES AND PROGRESS OF FIGHT	riogratereu P	tyent	
COHEN,	B. ROBERT	SON		8	1 Charat Ada	fress (P.O. Box Number is Not Acceptate			
	Prest Hill i			"	SIFEE AGE	iress (F.O. DOX INCIDE IS NOT ACCEPTAT	ulej		
WEST PA	alm Beach	FL 33406		8	3				
				8	4 City			Jos   7:	p Code
					- "		FL		='
<ol><li>Pursuant t</li></ol>	o the provision	I O I' AAD AEAA						anina ita	eaistered office
or registere	ed agent, or bo	s of Sections 607.0502 a oth, in the State of Florid	and 607.1508, Florida S a. Such change was aut	tatutes, the above	named corpo	pration submits this statement for the pu	irpose of char	ngng its r	' possit Loss
Or registere	cu ayeni, yi bi	zur, in the state of Fioriti	and 607.1508, Florida S a. Such change was aut on 607.0505, Florida Sta	Dorized by the cor	-named corpo poration's boa	oration submits this statement for the pur ard of directors. Thereby accept the app	rpose of char pointment as r	registered	lagent. Lam
familiar wit	h, and accept	the obligations of, Section	a. Such change was aut on 607.0505, Florida Sta	norized by the contutes.	poration's boa	ard of directors. I hereby accept the app	rpose or char pointment as r	registered	agent. Lam
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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 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-96 407-439-4300