2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J38964

City-St-Zip:

TAMPA, FL 33688

Entity Name: PRO TITLE SERVICES, INC

FILED Feb 07, 2008 Secretary of State

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Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
5617 PINE TAMPA, FI		6			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O.BOX 2 TAMPA, FI		6			
FEI Number:	: 59-2735661	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ALONSO, 5617 PINE TAMPA, FI	BAY DR.	6			
	named entity of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PST (ALONSO, RAM 5617 PINE BAY TAMPA, FL 33	/ DR	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	D (ALONSO, RAM 5617 PINE BAY TAMPA, FL 33	r DR.	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	VSD (HOYT, JAMES 11714 ORANG		Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

City-St-Zip:

SIGNATURE: RAMON ALONSO PRES 02/07/2008