

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2002 8:00 am**  
**Secretary of State**

04-30-2002 90193 018 \*\*\*\*50.00

**DOCUMENT # L00000010407**

1. Entity Name

**AMERICAN TITLE SERVICES, L.L.C.**

Principal Place of Business

**301 CLEMATIS ST., SUITE 206  
 WEST PALM BEACH FL 33401**

Mailing Address

**301 CLEMATIS ST., SUITE 206  
 WEST PALM BEACH FL 33401**

947884

2. Principal Place of Business

**301 CLEMATIS ST.  
 SUITE 203  
 WEST PALM BEACH FL**

3. Mailing Address

**301 CLEMATIS ST.  
 SUITE 203  
 WEST PALM BEACH FL**



DO NOT WRITE IN THIS SPACE

City & State

**WEST PALM BEACH FL**

City & State

**WEST PALM BEACH FL**

4. FEI Number

**65-1032967**

Applied For

Not Applicable

Zip

**33401**

Country

**USA**

Zip

**33401**

Country

**USA**

5. Certificate of Status Desired ☐

**\$5.00 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**KANJIAN, ROBERT J  
 301 CLEMATIS ST., SUITE 206  
 WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

Name **ROBERT J. KANJIAN**  
 Street Address (P.O. Box Number is Not Acceptable)  
**301 CLEMATIS ST.  
 SUITE 203**  
 City **WEST PALM BEACH FL** Zip Code **33401**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**4/16/02**

**FILE NOW!!! FEE IS \$50.00  
 Make Check Payable to Department of State  
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete  
 NAME **TITLE MATTERS, LLC**  
 STREET ADDRESS **301 CLEMATIS ST., SUITE 3000**  
 CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE **MGR** ☐ Delete  
 NAME **AMERICAN FLORIDA REALTY, INC.**  
 STREET ADDRESS **1481 S. MILITARY TRAIL #12**  
 CITY-ST-ZIP **WEST PALM BEACH FL 33415**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGR** ☒ Change ☐ Addition  
 NAME **TITLE MATTERS LLC**  
 STREET ADDRESS **301 CLEMATIS ST. SUITE 203**  
 CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

**SIGNATURE REQUIRED**

**4/16/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)