

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025516

FILED
Aug 03, 2007
Secretary of State

Entity Name: MUTUAL TRUST TITLE RELATED SERVICES LLC

Current Principal Place of Business:

13780 SW 26TH STREET STE 103
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

13780 SW 26TH STREET STE 103
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-2531359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

TORREZ, MARA
11068 SW 152ND COURT
MIAMI, FL 33196 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TORREZ, MARIA J
Address: 13780 SW 26TH STREET STE 103
City-St-Zip: MIAMI, FL 33175

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: TORREZ, FRINNE
Address: 13780 SW 26TH STREET STE 103
City-St-Zip: MIAMI, FL 33175

Title: MGRM () Change (X) Addition
Name: ESTADES, ROXANA
Address: 13780 SW 26TH STREET STE 103
City-St-Zip: MIAMI, FL 33175

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 is true and accurate and that my electronic 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: MARA TORREZ

P

08/03/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date