

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013381

Entity Name: AD VALOREM TITLE LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1806A NORTH UNIVERSITY DRIVE
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

1806A NORTH UNIVERSITY DRIVE
PLANTATION, FL 33322

New Mailing Address:

FEI Number: 20-8383015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASKARI, HINA
7000 W. OAKLAND PARK BLVD.
SUITE 302
FT. LAUDERDALE, FL 33313 US

Name and Address of New Registered Agent:

MILIAN, JESSICA
1806 N UNIVERSITY DRIVE
PLANATAION, FL 33322 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: JESSICA MILIAN

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALI, MOHAMMAD
Address: 1330 WEST AVENUE, #508
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM () Delete
Name: MILIAN, JESSICA
Address: 1806A NORTH UNIVERSITY DRIVE
City-St-Zip: PLANTATION, FL 33322

Title: MGRM () Delete
Name: FRASER, JOHN
Address: 400 ALEXSANDRA CIR.
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

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

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

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

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: MOHAMMAD ALI

MGRM

04/30/2008

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