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Jan 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L29651

(1)

1. Corporation Name

CERTIFIED TITLE SERVICES, INC.



Principal Place of Business

% SHERYL CANTOR
17971 BISCAYNE BOULEVARD, SUITE 219
MIAMI FL 33180

Mailing Address

% SHERYL CANTOR
17971 BISCAYNE BOULEVARD, SUITE 219
MIAMI FL 33180-2532

3. Date Incorporated or Qualified

11/15/1989

3a. Date of Last Report

03/27/1996

2. Principal Place of Business

21 2526 Jardin Dr.
Suite, Apt. #, etc.

2a. Mailing Address

26 2526 Jardin Dr.
Suite, Apt. #, etc.

4. FEI Number

65-0155108

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

CANTOR, SHERYL A.
17971 BISCAYNE BLVD.
SUITE 219
MIAMI FL 33180

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
2526 Jardin Drive
83
84 City Ft. Lauderdale FL 85 Zip Code 33327

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Sheryl A. Cantor

(NOTE: Registered Agent signature required when reinstating)

DATE

11/10/97

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	CANTOR, SHERYL A.	
STREET ADDRESS	17971 BISCAYNE BLVD. #219	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE	VP	DELETE
NAME	CANTOR, KATHY R	
STREET ADDRESS	17971 BISCAYNE BLVD. #219	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change Addition
1.2 NAME	
1.3 STREET ADDRESS	2526 Jardin Dr
1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33327
2.1 TITLE	Change Addition
2.2 NAME	
2.3 STREET ADDRESS	20000 NE 21 Ct
2.4 CITY-ST-ZIP	N. Miami Beach, FL 33179
3.1 TITLE	Change Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	Change Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	Change Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	Change Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sheryl A. Cantor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/10/97 954 3493426

CR2E034 (9/96)