FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1, Corporation Name

(1)

CERTIFIED TITLE SERVICES, INC.

FILED									
Mar	13	1998	8:00am						
Se	cret	tary of	f State						

-		·					
Principal Place	of Business	Mailing Address				O HOROTOLI BITE LIBITE IBILIO BILIOL DILOH INDI GHALI DILAH	A SIDIE DIDEL DIDII DIDII 1001
		% SHERYL CANTOR					
		2526 JARDIN DRIVE					
FT LAUDERDA	LE FL 33327	FT LAUDERDALE FL 333	27	,		DO NOT WRITE IN THIS	SPACE
US		US				3. Date Incorporated or Qualified	
						11/15/1989	
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number	Applied For
21	u 5.	26				65-0155108	Not Applicable
Suite, Apt. 4	#, e1C.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		City & State				2 Station Committee Financian	
City & State	•	28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	rv		8. This corporation owes or has paid the cu	
	25	29	30	,			Yes No
24	g Name and Address of Currer		190			10. Name and Address of New Registered	
CAL	ITOR, SHERYL A.		18	1 Name			
	6 JORDIN DRIVE		_				
	6 JOHUN DAIVE TE 219		[8	Street	Addres	is (P.O. Box Number is Not Acceptable)	
	LAUDERDALE FL 33327		- 	:3			
Fil	LAUDERDALE PL 3332/			<u> </u>			
			8	4 City		FL	85 Zip Code
dd Directors	a the provisions of Continuo CO7 DEC	12 and CO7 1509 Florida Statu	toe the abo	wo named	Learna	ation submits this statement for the purpose of	
office or re	enistered agent, or both, in the State	of Florida, Such change was	authorized	by the cor	poratio	n's board of directors. I hereby accept the ap	pointment as registered
agent. I ar	n familiar with, and accept the oblig-	ations of, Section 607.0505, Fi	lorida Statu	tes.			
SIGNATURE .		ALC:	ve Continued		a saa drad	when reinstating) DATE	
	Signature, typed or printed name of registered agr OFFICERS AN		13.	Agent signaturi	e requireo	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
12.	P CATICETS AN	DELETE	1.1 TITL		1	ADDITIONAL INTRACE TO CLYTOCHE THE	☐ Change ☐ Addition
NAME	CANTOR, SHERYL A.	—	1.2 NAM				
	2526 JARDIN DRIVE			ET ADORESS			
STREET ADDRESS	FT LAUDERDALE FL 33327		1	- ST- ZIP			
CITY-ST-ZIP TITLE	VP	DELETE	2.4 CIT		 		Change Addition
	CANTOR, KATHY R	<u></u>	2.2 NAM				/
NAME	20000 NE 21 CT			ET ADDRESS	26	43 Eagle Kun Wrive	
STREET ADDRESS	N MIAMI BEACH FL 33179				ine	43 Eagle Run Drive ston, FL 33327	
CITY-ST-ZIP	N MIXINI DEROIT E 33178	DELETE	3.1 TITL	r-ST-ZiP	WV.	11011 12 000 1	Change Addition
TITLE		□ ottett	3.1 HIL				
NAME			- 1				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		DELETE	3.4. CIT	r-ST-ZIP	+		Change Addition
TITLE		□ brrett	ı			1000024595	
NAME			4. 2 NA			-03/17/98010530	15
STREET ADDRESS				EFT ADDRESS		***75.00	••
City-St-ZIP		☐ DELETE		- ST - ZIP	┼	****10100	Change Addition
TITLE			5.1 TITU			1000024595	-
NAME			5.2 NAM		†	1000024595: -03/17/98010530	14
STREET ADDRESS				ET ADDRESS		***75.00	• '
CITY-ST-ZIP		DELETE		- ST - ZIP	-	*** 10.00	Change Addition
TITLE		[] DELETE	6.1 TITL	_			
NAME			6.2 NAM				42 19
STREET ADDRESS				EET ADDRESS			315
CITY-ST-ZIP	- Me Ab - Lab - Safarana Man - As - Safarana Man	ith this filing does not smallfur		-ST-ZIP	ed in S	action 119 07(3Vi) Florida Statutes further o	ertify that the information

14. Thereby certify that the information supplied with this filling 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 suppliermental 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, in on an attachment with an address.