

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L70540

FILED
Apr 27, 2004
Secretary of State

Entity Name: A-1 TITLE SUPPORT SERVICES, INC.

Current Principal Place of Business:

% CESAR E. SERRANO
P O BOX 557152
MIAMI, FL 332554152

New Principal Place of Business:

Current Mailing Address:

% CESAR E. SERRANO
P O BOX 557152
MIAMI, FL 332554152

New Mailing Address:

FEI Number: 65-0239986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERRANO, CESAR E.
4811 NW 79 AVE
SUITE 5
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SERRANO, CESAR E.,
Address: 4811 NW 79 AVE STE 5
City-St-Zip: MAIMI, FL 33166

Title: D () Delete
Name: SERRANO, MARIA A.,
Address: 4811 NW 79 AVE STE 5
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: SERRANO, CESAR E. JR.,
Address: 4811 NW 79 AVE STE 5
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: GONZALEZ, MITZI
Address: 4811 NW 79 AVE STE 5
City-St-Zip: MAIMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CESAR E SERRANO

D

04/27/2004

Electronic Signature of Signing Officer or Director

Date