#### 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

### DOCUMENT # M0400000141

1. Entity Name
USA TITLE, LLC



FILED
May 01, 2006 08:00 Al
Secretary of State

Principal Place of Business

2930 BISCAYNE BLVD. MIAMI, FL 33135 Mailing Address

2930 BISCAYNE BLVD. MIAMI, FL 33135



02142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0448854 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

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		THE
<ol> <li>The above named entity submits this statement for the purpose of the obligations of registered agent.</li> </ol>	changing its registered office or registered agent, or both, in the State	of Florida. I am familiar with, and accept
SIGNATURE	(NOTE. Registered Agent signature required when reinstaling)	DATE
Signature, typed or printed name of registered agent and title if applicable	(NOTE, Registered Again, algorithm regulars when restauring)	

#### Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	SK BUSINESS TRUST	
STREET ADDRESS	2930 BISCAYNE BLVD.	
CITY-ST-ZIP	MIAMI, FL 33135	
TITLE	MGRM	
NAME	RF BUSINESS TRUST	
STREET ADDRESS	2930 BISCAYNE BLVD.	
CITY-ST-ZIP	MIAMI, FL 33135	
TITLE	MGRM	
NAME	MENIN 1998 FAMILY TRUST	
STREET ADDRESS	2930 BISCAYNE BLVD.	
CITY-ST-ZIP	MIAMI, FL 33135	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
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CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11 ) bareby certify that the information symptied with this filling does not qualify for the even		

U00000546544 05/11/06-80121-012 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under eath; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESE

Russell Galbut, Trustee of RF Business Trust, Managing Member, 2/14/06 305.374.5700