

2001 UNIFORM BUSINESS REPORT (UBR)

05-04-2001 90T66 029 ***150.00

DOCUMENT # **P00000028737**

1. Entity Name

South Florida Title Associates, Inc.

FILED

01 MAY 18 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
8433 W. Okeechobee Rd. 8433 W. Okeechobee Rd.
Hialeah Gardens, FL Hialeah Gardens, FL
33016 33016

2. Principal Place of Business 3. Mailing Address
299 Alhambra Cr. 299 Alhambra Cr., #405

Suite, Apt. #, etc. Suite, Apt. #, etc.
405 Suite # 405
City & State City & State
Coral Gables, FL Coral Gables, FL

Zip Country Zip Country
33134 U.S.A. 33134 U.S.A.

4. FEI Number Applied For
65-0991639 Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

LS

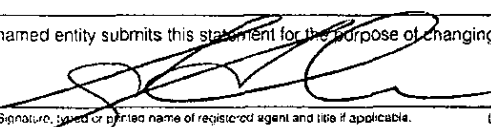
6. Name and Address of Current Registered Agent

Andrew I. Aleman
8433 West Okeechobee Road
Hialeah Gardens, FL 33016

7. Name and Address of New Registered Agent

Name Andrew I. Aleman, Esq.
Street Address (P.O. Box Number is Not Acceptable)
299 Alhambra Circle
Suite 405
City Coral Gables, FL FL Zip Code 33134

8. 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  Andrew I. Aleman Esq., President 2/21/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☒
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Andrew I. Aleman, Esq. 8433 W. Okeechobee Rd. Hialeah Gardens, FL 33016 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Exec. Vice President Iris Padron 299 Alhambra Circle, Suite 405 Coral Gables, FL 33134 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other fees empowered.

SIGNATURE:  Andrew I. Aleman 2/21/01
Signature, typed or printed name of signing officer or director Date Daytime Phone

CR2E034 (11/00)