2001 UNIFORM BUSINESS REPORT (UBR)

05-04-2001 90166 029 ***150.00

FILED
01 MAY 18 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000025737

1. Entity Name

South Florida Title Associates, Inc.

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

2. Principal Place of Business		3. Mailing Address	
299 Alhambra Cr.		299 Alhambra Cr., #405	
Suite, Apt. #, etc.: 405		Suite, Apt. #, etc.: Suite # 405	
City & State: ~~Coral Gables, FL~~		City & State: Coral Gables, FL	
Zip: 33134	Country: U.S.A.	Zip: 33134	Country: U.S.A.

DO NOT WRITE IN THIS SPACE

LS

4. FEI Number: 65-0991639 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Andrew I. Aleman
8433 West Okeechobbe 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: [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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
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	Exec. Vice President Irid Padron 299Alhambra Circle, Suite 405 Coral Gables, FL 33134	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

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 like empowered.

SIGNATURE: [signature] Andrew I. Aleman 2/21/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #