

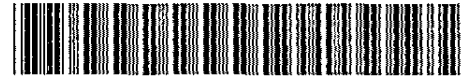
DOCUMENT # P00000048611

1. Entity Name

FLORIDA TRUST TITLE SERVICES, INC.



FILED
Feb 26, 2007 08:00 AM
Secretary of State



1st MOORE CR2E034 (10/06)

4. FEI Number 65-1008971

Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUENGO, IVETTE M
 400 S.W. 107 AVENUE
 MIAMI FL 33174

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☐ Delete
 NAME LUENGO, IVETTE M
 STREET ADDRESS 400 S.W. 107 AVENUE
 CITY - ST - ZIP MIAMI FL 33174

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS 000000646792
 CITY - ST - ZIP 03/06/07-80048-002 150.00

TITLE ☐ Delete
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 STREET ADDRESS
 CITY - ST - ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/07

Daytime Phone