

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000078733

1. Entity Name

PREMIER TITLE & REAL ESTATE SERVICES, INC.

Principal Place of Business

4200 NW 16TH STREET
107
LAUDERHILL FL 33313

Mailing Address

4200 NW 16TH STREET
107
LAUDERHILL FL 33313

2. Principal Place of Business

4200 NW 16 Street

Suite, Apt. #, etc.

Suite 307

City & State

Lauderhill, FL

Zip

33313

Country

3. Mailing Address

4200 NW 16 Street

Suite, Apt. #, etc.

Suite 307

City & State

Lauderhill, FL

Zip

33313

Country

4. FEI Number

65-1036066

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCKENZIE, ORVILLE ESQ
3615 N.W. 121 AVE
SUNRISE FL 33323

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.

SIGNATURE

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, 2002 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 D
NAME CHLOUPEK, CAROL ESQ
STREET ADDRESS 3600 S. STATE ROAD STE 241
CITY-ST-ZIP MIRAMAR FL 33023 ☒ Delete

TITLE P
NAME GOLDING, DAVID ESQ
STREET ADDRESS 15313 SW 104TH STREET
CITY-ST-ZIP MIAMI FL 33196 ☐ Delete

TITLE S
NAME MURPHY, SHIRLEY
STREET ADDRESS 263 NE 162ND STREET
CITY-ST-ZIP MIAMI FL 33162 ☐ Delete

TITLE VP
NAME WEBLEY, ANDREA ESQ
STREET ADDRESS 7551 VISCAVY CIRCLE
CITY-ST-ZIP MARGATTE FL 33063 ☐ Delete

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 ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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 prior filers empowered.

SIGNATURE

Andrea Webley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/02

Date

954-485-5569

Daytime Phone #

FILED
Jan 09, 2002 8:00 am
Secretary of State

01-09-2002 90023 050 ***150.00



DO NOT WRITE IN THIS SPACE

0030305 AV

CR2E034 (9/01)