

2002 UNIFORM BUSINESS REPORT (UBR)

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

04-09-2002 90723 031 ***150.00

DOCUMENT # P01000030451

1. Entity Name
EXPRESS TITLE SUPPORT SERVICES, INC.

Principal Place of Business

**14204 SW 57 LN.
MIAMI FL 33183**

Mailing Address

**14204 SW 57 LN.
MIAMI FL 33183**

2. Principal Place of Business

7075 S.W. 162 Path

3. Mailing Address

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

4. FEI Number

05-0761526

Applied For
Not Applicable

Zip

33193

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~ELITE TITLE SERVICES, INC.~~
**395 ALHAMBRA CIR., STE. 200
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name **LYLIAN RELOBA**

Street Address (P.O. Box Number is Not Acceptable)
7075 S.W. 162 Path

City **Miami**

FL

Zip Code
33183

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]

LYLIAN RELOBA PRESIDENT

3/28/02

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** ☐ Delete
NAME **RELOBA, LEONARDO JR**
STREET ADDRESS **14204 SW 57 LN.**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE **D** ☐ Delete
NAME **RELOBA, LYLIAN**
STREET ADDRESS **14204 SW 57 LN.**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **V/S/D** ☒ Change ☐ Addition
NAME **RELOBA, LEONARDO JR.**
STREET ADDRESS **7075 S.W. 162 Path**
CITY-ST-ZIP **Miami, FL 33193**

TITLE **P/T/D** ☒ Change ☐ Addition
NAME **RELOBA, LYLIAN**
STREET ADDRESS **7075 S.W. 162 Path**
CITY-ST-ZIP **Miami, FL 33193**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LYLIAN RELOBA Pres 3/28/02 (305) 388-9092

Date

Daytime Phone #

CR2E034 (9/01)