

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90104 022 ***158.75

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # PD1000094693 ✓
1. Entity Name

PG Title Services, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
555 NE 15th St.

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite 100

Suite, Apt. #, etc.

City & State

Miami FL

City & State

4. FEI Number

65-1140527

Applied For

☐ Not Applicable

Zip 33132

Country

Miami-Dade

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Philip S. Goldin

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

494 S 55th St Ste 100

City Miami

FL

Zip Code 33132

**DO NOT WRITE
IN THIS SPACE**

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 Philip S. Goldin President

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

(NOTE: Registered Agent signature required when reinstating)

DATE April 23, 2002

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1st - May 1st Fee is \$150.00

After May 1st Fee is \$550.00

Amended UBR is \$61.25

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 Philip S. Goldin
STREET ADDRESS President, Vice-President
CITY-STATE-ZIP Sec. Treasurer

TITLE
NAME
STREET ADDRESS 555 NE 15th St
CITY-STATE-ZIP Suite 100
Miami FL 33132

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Philip S. Goldin 4/23/02 305-371-7208

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)