


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2006 8:00 am**  
**Secretary of State**

01-25-2006 90029 023 \*\*\*150.00

<b>DOCUMENT # P02000014964</b> 1. Entity Name <b>SOUTHEAST FLORIDA TITLE SERVICES CORP.</b>					
Principal Place of Business <b>1301 N. CONGRESS AVENUE SUITE 2120 BOYNTON BEACH, FL 33426</b>			Mailing Address <b>1301 N. CONGRESS AVENUE SUITE 2120 BOYNTON BEACH, FL 33426</b>		
2. Principal Place of Business Suite, Apt. #, etc. <b>SUITE 120</b>		3. Mailing Address Suite, Apt. #, etc. <b>SUITE 120</b>		01232006    Chg-P    CR2E034 (11/05)	
City & State Zip                      Country		City & State Zip                      Country		4. FEI Number <b>02-0544606</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>WEINSTEIN, RICHARD S PRES. 1301 N CONGRESS AVE SUITE 120 BOYNTON BEACH, FL 33426</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P</b> <b>WEINSTEIN, RICHARD S</b> <b>1301 N CONGRESS AVE STE 120</b> <b>BOYNTON BEACH, FL 33426</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>CEO</b> <b>TILLER, MARC R</b> <b>6124 NW 123RD LANE</b> <b>CORAL SPRINGS, FL 33076</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.					
<b>SIGNATURE:</b> _____ <b>1/23/06</b> <b>561-364-1110</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR    Date    Daytime Phone #</small>					