

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90262 048 \*\*\*158.75

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<b>DOCUMENT # P02000032976</b> 1. Entity Name <b>PRODIGY TITLE, INC.</b>					
Principal Place of Business <b>7491 W OAKLAND PARK BLVD. STE. 306 LAUDERHILL, FL 33319</b>			Mailing Address <b>7491 WEST OAKLAND PARK BLVD 2ND FLOOR LAUDERHILL, FL 33319</b>		
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address <b>7491 W. Oakland Park Blvd.</b> Suite, Apt. #, etc. <b>Suite 306</b> City & State <b>Lauderhill, FL 33319</b> Zip      Country <b>33319      US</b>			
		4. FEI Number <b>90-0036587</b>		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>BERRICK, KENNETH 7491 WEST OAKLAND PARK BLVD LAUDERHILL, FL 33319</b>			7. Name and Address of New Registered Agent Name <b>Carol M. Otis</b> Street Address (P.O. Box Number is Not Acceptable) <b>7491 W. Oakland Pk. Blvd</b> <b>Suite 306</b> City      State      Zip Code <b>Lauderhill      FL      33319</b>		
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 <u><i>Carol M. Otis</i></u> DATE <b>04/27/05</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <b>BERRICK, KENNETH</b> <input checked="" type="checkbox"/> Delete <b>7491 WEST OAKLAND PARK BLVD</b> <b>LAUDERHILL, FL 33319</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <b>Otis, Carol M.</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>7491 W. Oakland Pk., #306</b> <b>Lauderhill, FL 33319</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Carol M. Otis</i></u> <b>Carol M. Otis</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u><i>4/27/05</i></u> Daytime Phone # <u><i>954-578-3831</i></u>		