



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2006 8:00 am**  
**Secretary of State**

03-13-2006 90082 015 \*\*\*150.00

<b>DOCUMENT # P02000041738</b> 1. Entity Name <b>STATE TITLE CORP.</b>					
Principal Place of Business <b>5511 SW 8TH STREET SUITE 201 MIAMI, FL 33134</b>			Mailing Address <b>5511 SW 8TH STREET SUITE 201 MIAMI, FL 33134</b>		
2. Principal Place of Business <b>8700 W. Flagler ST.</b>		3. Mailing Address <b>8700 W. Flagler ST.</b>		<div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">40030050</div>  <div style="display: flex; justify-content: space-between; font-size: 10px;"> <span>03092006</span> <span>Chg-P</span> <span>CR2E034 (11/05)</span> </div>	
Suite, Apt. #, etc. <b># 390</b>		Suite, Apt. #, etc. <b># 390</b>			
City & State <b>Miami, Florida</b>		City & State <b>Miami, Florida</b>			
Zip <b>33174</b>	Country <b>Miami-Dade</b>	Zip <b>33174</b>	Country <b>Miami-Dade</b>		
4. FEI Number <b>04-3647150</b>				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CISNEROS, MERCEDES L 5511 SW 8TH STREET SUITE 201 MIAMI, FL 33134</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>8700 W. Flagler ST.</b> Suite # 390 City <b>Miami, Florida</b> <b>FL</b> Zip Code <b>33174</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>[Signature]</i></u> (NOTE: Registered Agent signature required when reinstating) DATE _____					
<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>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD <b>CISNEROS, MERCEDES L 5511 SW 8TH STREET SUITE 201 MIAMI, FL 33134</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 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.					
SIGNATURE: <u><i>[Signature]</i></u> <span style="float: right;">3/8/06</span> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <span style="float: right;">Date Daytime Phone #</span>					