


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90060 038 ***150.00

DOCUMENT # P02000053624					
1. Entity Name BISCAYNE TITLE COMPANY					
Principal Place of Business 11211 PROSPERITY FARMS ROAD SUITE C-301 PALM BCH GARDENS, FL 33410			Mailing Address 11211 PROSPERITY FARMS ROAD SUITE C-301 PALM BCH GARDENS, FL 33410		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 01-0704629		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired: <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FIELDS, PRESTON J 11211 PROSPERITY FARMS ROAD SUITE C-301 PALM BCH GARDENS, FL 33410			Name <u>Fields, Sr., Preston J.</u> Street Address (P.O. Box Number is Not Acceptable) City <u>FL</u> 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 <u>Preston J. Fields, Sr.</u> 1/19/04 <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, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST FIELDS, PRESTON J <input type="checkbox"/> Delete 11211 PROSPERITY FARMS ROAD, SUITE C-301 PALM BCH GARDENS, FL 33410		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fields, Sr., Preston J. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition address same	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FIELDS, PRESTON J <input type="checkbox"/> Delete 11211 PROSPERITY FARMS ROAD, SUITE C-301 PALM BCH GARDENS, FL 33410		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fields, Sr. Preston J. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Address same	
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>Preston J. Fields, Sr.</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1/19/04 <small>Date</small>		561-799-9910 <small>Daytime Phone #</small>