

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000055819

FILED
Aug 06, 2003
Secretary of State

Entity Name: C&M TITLE INC.

Current Principal Place of Business:

4979 SW 86 WAY
COOPER CITY, FL 33328

New Principal Place of Business:

3754 WEST 12TH AVENUE
HIALEAH, FL 33012

Current Mailing Address:

4979 SW 86 WAY
COOPER CITY, FL 33328

New Mailing Address:

3754 WEST 12TH AVENUE
HIALEAH, FL 33012

FEI Number: 75-3058855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASALS-MUNOZ, VIVIAN
4979 SW 86 WAY
COOPER CITY, FL 33328

Name and Address of New Registered Agent:

CASALS-MUNOZ, VIVIAN
3754 WEST 12TH AVENUE
HIALEAH, FL 33012

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:

08/06/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASALS-MUNOZ, VIVIAN
Address: 4979 SW 86 WAY
City-St-Zip: COOPER CITY, FL 33328

Title: SD () Delete
Name: MONTEAGUDO, ISRAEL I
Address: 4979 SW 86 WAY
City-St-Zip: COOPER CITY, FL 33328

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CASALS-MUNOZ, VIVIAN
Address: 3754 WEST 12TH AVENUE
City-St-Zip: HIALEAH, FL 33012

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: GARCIA, RENE
Address: 217 EAST 63RD STREET
City-St-Zip: HIALEAH, FL 33013

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIVIAN CASALS-MUNOZ

PR

08/06/2003

Electronic Signature of Signing Officer or Director

Date