

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90121 017 ***150.00

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1. Entity Name
CONCEPT TITLE SERVICES, INC.



Principal Place of Business
**7599 N.W. 7TH STREET
MIAMI FL 33126**

Mailing Address
**7599 N.W. 7TH STREET
MIAMI FL 33126**

2. Principal Place of Business
**815 N.W. 57 avenue
Suite # 405**

3. Mailing Address
**815 N.W. 57 AVENUE
Suite #405**

City & State
miami, Florida

City & State
miami, Florida

Zip Country
33126 MIAMI-Dade

Zip Country
33126 MIAMI-DADE

4. FEI Number
605-0423742

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**ESPINOSA, PATRICIA O ESQ.
7599 N.W. 7TH STREET
MIAMI FL 33126**

7. Name and Address of New Registered Agent

Name **PATRICIA O. ESPINOSA, ESQ.**
Street Address (P.O. Box Number is Not Acceptable)
**815 N.W. 57 Avenue
Suite 405**
City **MIAMI** FL Zip Code **33126**

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 **Patricia O Espinosa**
Signature, typed or printed name of registered agent and title, applicable.

(NOTE: Registered Agent signature required when reinstating)

1/10/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST ESPINOSA, PATRICIA O 7599 N.W. 7TH STREET MIAMI FL 33126 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ESPINOSA, PATRICIA O 7599 N.W. 7TH STREET MIAMI FL 33126 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST D Patricia O Espinosa 815 NW 57 Ave., Suite 405 MIAMI, FLORIDA 33126 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President/Director DINORAH PENABAZ 815 NW 57 AVENUE, Suite 405 MIAMI, FLORIDA 33126 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: **Patricia O. Espinosa**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/03
Date

305-266-8786
Daytime Phone #

CR2E034 (10/02)