

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000094820

1. Entity Name
POPULAR TITLE, INC.



Principal Place of Business

**202 LOOKOUT PLACE
SUITE 202
MAITLAND, FL 32751**

Mailing Address

**202 LOOKOUT PLACE
SUITE 202
MAITLAND, FL 32751**



01222004 No Chg-P CR2E034 (10/03)

4. FEI Number
35-2179666

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CELIA, MENDEZ M
202 LOOKOUT PLACE
SUITE 200
MAITLAND, FL 32751**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000013303
01/26/04-80048-006 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CASTRO, MARCIA
STREET ADDRESS	5820 LUZON PLACE
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	VD
NAME	MENDEZ, FRANCIS X
STREET ADDRESS	202 LOOKOUT PLACE, SUITE 200
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	TD
NAME	MENDEZ, CELIA M
STREET ADDRESS	202 LOOKOUT PLACE, SUITE 200
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	SD
NAME	LOURDES, CASTRO
STREET ADDRESS	5820 LUZON PLACE
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.