

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104597

FILED  
Apr 22, 2004  
Secretary of State

Entity Name: ALLSTATE TITLE AND ESCROW COMPANY, INC.

## Current Principal Place of Business:

18142 SW 97 AVE  
PALMETTO BAY, FL 33157

## New Principal Place of Business:

## Current Mailing Address:

18142 SW 97 AVE  
PALMETTO BAY, FL 33157

## New Mailing Address:

FEI Number: 68-0523969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AJABSHIR, MIKE  
930 HIALEAH DR  
#9  
HIALEAH, FL 33010 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SANDLER, JEFFREY  
Address: 303 NATIONAL ORANGE AVE.  
City-St-Zip: OSDMAR, FL 34677

Title: D ( ) Delete  
Name: AJABSHIR, MIKE  
Address: 17891 S. DIXIE HWY  
City-St-Zip: MIAMI, FL 33157

Title: D (X) Delete  
Name: AJABSHIR, SOHEILA  
Address: 17891 S. DIXIE HWY  
City-St-Zip: MIAMI, FL 33157

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: AJABSHIR, SOHEILA  
Address: 17891 S. DIXIE HWY  
City-St-Zip: PALMETTO BAY, FL 33157

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

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

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: AJABSHIR

RA

04/22/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date