

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003317

FILED  
Mar 13, 2009  
Secretary of State

Entity Name: FLORIDA TITLE MANAGEMENT, CORP.

## Current Principal Place of Business:

2500 NW 107 AVE.  
#402  
MIAMI, FL 33122

## New Principal Place of Business:

2061 NW 85 AVENUE  
PEMBROKE PINES, FL 33024

## Current Mailing Address:

2500 NW 107 AVE.  
#402  
MIAMI, FL 33122

## New Mailing Address:

2061 NW 85 AVENUE  
PEMBROKE PINES, FL 33024

FEI Number: 81-0589851

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIAZ, O.J.  
7951 SW 40TH ST., SUITE 206  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

CASTILLO, JOCELYNE  
2061 NW 85 AVENUE  
PEMBROKE PINES, FL 33024 US

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: JOCELYN CASTILLO

03/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: CASTILLO, JOCELYNE  
Address: 2500 NW 107 AVE., #402  
City-St-Zip: MIAMI, FL 33172

Title: VSD ( ) Delete  
Name: AMARAN, ALIUSKA  
Address: 2500 NW 107 AVE., #402  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: CASTILLO, JOCELYNE  
Address: 2061 NW 85 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VSD (X) Change ( ) Addition  
Name: AMARAN, ALIUSKA  
Address: 2061 NW 85 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOCELYN CASTILLO

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03/13/2009

Electronic Signature of Signing Officer or Director

Date