

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006709

FILED  
May 01, 2006  
Secretary of State

Entity Name: TTM TITLE INSURANCE COMPANY

## Current Principal Place of Business:

8500 W FLAGLER ST A-105  
MIAMI, FL 33144

## New Principal Place of Business:

## Current Mailing Address:

8500 W FLAGLER ST A-105  
MIAMI, FL 33144

## New Mailing Address:

FEI Number: 02-0667413

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOTO, ANTONIO J III  
8500 W FLAGLER ST A-105  
MIAMI, FL 33144 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SOTO, ANTONIO J  
Address: 8500 W FLAGLER ST A-105  
City-St-Zip: MIAMI, FL 33144

Title: VD ( ) Delete  
Name: SIMON, MARIPII  
Address: 8500 W FLAGLER ST A-105  
City-St-Zip: MIAMI, FL 33144

Title: TD ( ) Delete  
Name: BERMUDEZ, MARIA C  
Address: 8500 W FLAGLER ST A-105  
City-St-Zip: MIAMI, FL 33144

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: ANTONIO J SOTO III

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date