

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000064657

**FILED**  
**Apr 08, 2005**  
**Secretary of State**

**Entity Name:** GUARANTEE TITLE SERVICES, INC.

**Current Principal Place of Business:**

10585 SW 109 CT.  
STE. 208  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

10585 SW 109 CT.  
STE. 208  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 27-0060543

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

YANES, SURELIS  
11310 SW 145 AVENUE  
MIAMI, FL 33186 US

**Name and Address of New Registered Agent:**

YANES, SURELIS  
5067 SW 165 CT  
MIAMI, FL 33185 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:**

04/08/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DP ( ) Delete  
**Name:** YANES, SURELIS  
**Address:** 11310 SW 145 AVENUE  
**City-St-Zip:** MIAMI, FL 33186

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** DP (X) Change ( ) Addition  
**Name:** YANES, SURELIS  
**Address:** 5067 SW 165 CT  
**City-St-Zip:** MIAMI, FL 33185

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:** SURELIS YANES

DP

04/08/2005

Electronic Signature of Signing Officer or Director

Date