2004 FOR PROFIT CORPORATION . ANNUAL REPORT

FILED May 18, 2004 8:00 am Secretary of State

DOCUMENT # P03000068909 1. Entity Name MONARCH TITLE SERVICES, INC.		. (02	I-28-2004 90	285 035 **	*150.00		
ncipal Place of Business Mailing Address							
2891 SW 47 ST MAMI, FL 33175			66422592				
Principal Place of Business	3. Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, etc.			01162004 Chg-P CR2E034 (10/03		E034 (10/03)		
City & State	City & State		4. FEI Number //9	5419.	h	plied For t Applicable	
Zip Country	Zip	Country	5. Certificate of Status	Desired 🔲	\$8.75 Add Fee Required		
6. Name and Address of Curre	ent Registered Agent	Name	7. Name and Address	of New Register	ed Agent		
PIEDRA, NIURKA R ESQ. 12891 SW 47 ST		Street Address		(P.O. Box Number is Not Acceptable)			
MIAMI, FL 33175							
The above named entity submits the statement the obligations of registrated agent.		City	· · · · · · · · · · · · · · · · · · ·	F	Zip Cod	-	
Signature Signature produce projetname of registated a FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$55	9. Election Campa		5.00 May Be ded to Fees	DA			
	ND DIRECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS			
PIEDRA, NIURKA R ESQ. STREET ADDRESS 12891 SW 47 ST	□ Deleta	NAME STREET ADDRESS	,		☐ Change	☐ Addition	
INITE MIAMI, FL 33175 TITLE VAME STREET ADDRESS	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS			Change	Addition	
ITY-ST-ZIP ITLE IAME TREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS			Change	Addition	
ITY-ST-ZIP	Dobate	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		Change	Addition_	
ITLE VAME STREET ADDRESS SITY-ST-ZIP	☐ Deleta	ITTLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
DTLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delate	TITLE NAME STREET ADDRESS GTY-ST-ZP			☐ Change	Addition	
12. I hereby certify that the information supplied indicated on this report or suppliemental sport the corporation or the receiver or rusples of the corporation or the receiver or rusples of the corporation or the receiver or rusples of the changed, or on an attachment with an additional sport of the corporation of	with this filing does not qualify to on is true and accurate and that employees with all other like empowere to on PREMED MAKE OF SURNING OFFICE		Section 119.07(3)(i), Fioridies same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida Statutes; and the same legal effect as if m. 107, Florida ef	, ,	r certify that the at I am an office ars in Block 10 c	information or or director or Block 11 if	