2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000129013

Entity Name: VG TITLE SERVICES, INC.

FILED May 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6405 N.W. 36 STREET 6405 N.W. 36 STREET

MIAMI, FL 33166 SUITE 226

VIRGINIA GARDENS, FL 33166

Current Mailing Address: New Mailing Address:

630 PLOVER AVE. 6405 NW 36 STREET

MIAMI, FL 33166 SUITE 226

VIRGINIA GARDENS, FL 33166

FEI Number: 65-1209013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LARROQUE, SUSANA
6405 N.W. 36 STREET
LARROQUE, SUSANA
6405 N.W. 36 STREET
LARROQUE, SUSANA
6405 N.W. 36 STREET

MIAMI, FL 33166 US SUITE 226
VIRGINIA GARDENS, FL 33166 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: SUSANA LARROQUE 05/05/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 LARROQUE, SUSANA
 Name:
 LARROQUE, SUSANA

 Address:
 6405 NW 36 ST.
 Address:
 6405 NW 36 ST., SUITE 226

 Address:
 6405 NW 36 ST.
 Address:
 6405 NW 36 ST., SUITE 226

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 VIRGINIA GARDENS, FL 33166

Name: DIAZ, ELINA J Name: DIAZ, MARIA E

 Address:
 6405 NW 36 ST.
 Address:
 6405 NW 36 ST., SUITE 226

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 VIRGINIA GARDENS, FL 33166

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: SUSANA LARROQUE P 05/05/2006