

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000005315**

1. Entity Name  
**ALL CLEAR TITLE SERVICES, INC.**



Principal Place of Business  
**8040 NW 155TH ST SUITE 103  
MIAMI LAKES, FL 33016**

Mailing Address  
**8040 NW 155TH ST SUITE 103  
MIAMI LAKES, FL 33016**



03282007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**03-0534082**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**PENSON, JOHN  
9999 NE 2ND AVE, STE 204  
MIAMI SHORES, FL 33138**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PEREZ, FELIX H 7930 NW 36 ST #22 MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS PEREZ, BEATRIZ 7930 NW 36 ST #22 MIAMI, FL 33166
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**DO NOT WRITE  
IN THIS SPACE**

U00000713084  
04/26/07-80075-022 50.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Beatriz Perez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/07  
Date

305-779-1079  
Daytime Phone #