

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000145904

FILED
Jan 02, 2007
Secretary of State**Entity Name:** PRESTIGE TITLE SPECIALISTS, INC.**Current Principal Place of Business:**11900 BISCAYNE BOULEVARD
SUITE 600
MIAMI, FL 33181**New Principal Place of Business:****Current Mailing Address:**11900 BISCAYNE BOULEVARD
SUITE 600
MIAMI, FL 33181**New Mailing Address:****FEI Number:** 20-1782640**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SHOTWELL, MIA
11900 BISCAYNE BOULEVARD
SUITE 600
MIAMI, FL 33181 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

OFFICERS AND DIRECTORS:

Title: O/D () Delete
Name: ALVAREZ, GERARDO A
Address: 11900 BISCAYNE BOULEVARD, SUITE 600
City-St-Zip: MIAMI, FL 33181

Title: OFF () Delete
Name: SHOTWELL, MIA
Address: 11900 BISCAYNE BOULEVARD, SUITE 600
City-St-Zip: MIAMI, FL 33161

Title: P/D () Delete
Name: RAULT, RAYMOND
Address: 11900 BISCAYNE BOULEVARD, SUITE 600
City-St-Zip: MIAMI, FL 33181

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O/D (X) Change () Addition
Name: FAJARDO, ADRIANA M
Address: 11900 BISCAYNE BOULEVARD, SUITE 600
City-St-Zip: MIAMI, FL 33181

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

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

Title: OFF () Change (X) Addition
Name: GUARIGLIA, MARK
Address: 11900 BISCAYNE BLVD 600
City-St-Zip: MIAMI, FL 33181 US

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: ADRIANA FAJARDO

P/D

01/02/2007

Electronic Signature of Signing Officer or Director

Date