2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000150872

Entity Name: FLORIDA TITLEWORKS, INC.

FILED Apr 27, 2005 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

169 E. FLAGLER STREET 150 S. PINE ISLAND ROAD SUITE 1224 SUITE 540

MIAMI, FL 33131 PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

169 E. FLAGLER STREET 150 S. PINE ISLAND ROAD SUITE 1224 SUITE 540

MIAMI, FL 33131 PLANTATION, FL 33324

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

ROSEN, SCOTT ROSEN, SCOTT

169 E. FLAGLER STREET 150 S. PINE ISLAND ROAD SUITE 1224 SUITE 540

MIAMI, FL 33131 US PLANTATION, FL 33324 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: SCOTT ROSEN 04/27/2005

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: PS (X) Change () Addition

Name: ROSEN, SCOTT Name: ROSEN, SCOTT

 Address:
 169 E. FLAGLER STREET, SUITE 1224
 Address:
 150 S. PINE ISLAND ROAD, #540

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 PLANTATION, FL 33324

Title: VP () Delete Title: VPT (X) Change () Addition

Name: HANK, MARY I Name: ROSEN, MARIA C

 Address:
 8830 S. LAKE DASHA DRIVE
 Address:
 150 S. PINE ISLAND ROAD, #540

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 PLANTATION, FL 33324

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

Name: CLARK, BRET Name:

Address: 8830 S. LAKE DASHA DRIVE Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip:

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

 Name:
 ROSEN, MARIA C
 Name:

 Address:
 169 E. FLAGLER STREET, SUITE 1224
 Address:

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:

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: SCOTT ROSEN P 04/27/2005