

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158173

Entity Name: AMERICAN TITLE USA, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

2401 E ATLANTIC BLVD SUITE 400
POMPANO BEACH, FL 33062

New Principal Place of Business:

2401 E ATLANTIC BLVD
SUITE 400
POMPANO BEACH, FL 33062

Current Mailing Address:

2401 E ATLANTIC BLVD SUITE 400
POMPANO BEACH, FL 33062

New Mailing Address:

2401 E ATLANTIC BLVD
SUITE 400
POMPANO BEACH, FL 33062

FEI Number: 20-3334967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULTE, NEMIA L
2401 E ATLANTIC BLVD SUITE 400
POMPANO BEACH, FL 33062 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHULTE, NEMIA L
Address: 2401 E ATLANTIC BLVD SUITE 400
City-St-Zip: POMPANO BEACH, FL 33062

Title: VD () Delete
Name: JASANSKY, PETR
Address: 310 SE 5TH TERR
City-St-Zip: POMPANO BEACH, FL 33060

Title: SD () Delete
Name: SEBKOVA, MIROSLAVA
Address: 310 SE 5TH TERR
City-St-Zip: POMPANO BEACH, FL 33060

Title: DT () Delete
Name: SCHULTE, PHILIP J
Address: 381 SE 5TH TERR
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: NEMIA L. SCHULTE

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date