## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 05, 2007 8:00 am Secretary of State

					Secretary of State				
DOCUMENT # P05000091603  1. Entity Name APEX TITLE & ESCROW CORP.					02-05-2007 90077 030 ***150.00				
Principal Plac	e of Business	Mailing Address			טטטב	ひんひひ			
6625 MIAMI	LAKES DRIVE	17455 NW 75 PLACE							
SUITE 213		#111		ļ					
MIAMI LAKES	S, FL 33014 US	MIAMI, FL 33015 US			1 (80)(80) 80	8 8381 8 JUL W 8 81 8 8 8 8 8 8 8 8 8	II SANIA INIALNIANA DIKA MATRA NI	ITOLIS IOTI	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address  GG25 Michael Company Compa	ami Cak	es No					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02012007	Chg-P	CR2E034 (12/06)		
City & Stat	e	Miam: Ca	kes F		4. FEI Numbe 20-353		<del>  </del>	plied For t Applicable	
Zip	Country	33014	Country	• 1	·	of Status Desired	S8.75 Add Fee Required		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name									
RODRIGUEZ, JOSEPH M JR.  17455 NW 75 PLACE GG 25 Miami (akes b. Street Address (P.O. Box Number is Not Acceptable)						e)			
#ITT # 23045 # 213									
MIAMI; FL	-33015 T	okas Fl 221	SILL				_	_	
	וווטמו מ	akes, FC 330	City				FL Zip Code	-	
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.									
The substitute of the grantes and against the substitute of the su									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees									
10.	OFFICERS AND	DIRECTORS	11,		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTORS	S IN 11	
TITLE	P	☐ Delete	TITLE				Change	☐ Addition	
NAME	RODRIGUEZ, JOSEPH M JR.	'	NAME				-	_	
STREET ADDRESS	17455 NW 75 PLACE, #111			ee as	injor	ni cakes	s br. #21	3	
CITY-ST-ZIP	MIAMI, FL 33015		CITY-ST-ZIP	wic	تكسير	akes, f	<u>C 33014</u>		
ILLE	VP	☐ Delete	TITLE	ļ			Change	☐ Addition	
NAME STREET ADDRESS	VAZQUEZ, VANESSA 17455 NW 75 PLACE, #111		name Street address	GGD	= m:c	is cak	thind es	212	
CITY-ST-ZIP	MIAMI, FL 33015		CITY-ST-ZIP	~	2 1 110	inhee	FC 33014	<u> </u>	
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NAME			NAME						
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IUTE		☐ Delete	TITLE				☐ Change	Addition	
NAME			NAME						
STREET ADDRESS CITY+ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
\			<del></del>	<del>  -</del>			Change	☐ Addition	
TITLE NAME		☐ Delete	TITLE NAME				☐ change	L Addition	
STREET ADDRESS			STREET ADDRESS						
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12. I hereby certify that the information supplied with this filling 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 otherwise empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF STAINS OFFICER OR DOS

SIGNATURE:

Vanessa Vazquez

02/01/07

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