2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 18, 2006
Secretary of State

DOCUMENT# P05000121580

Entity Name: ADVANCE TITLE CORPORATION

Current Principal Place of Business:

300 SOUTH PINE ISLAND ROAD
SUITE 248
PLANTATION, FL 33324

New Principal Place of Business:

8320 W. SUNRISE BLVD
SUITE 209
PLANTATION, FL 33322

Current Mailing Address:

300 SOUTH PINE ISLAND ROAD
SUITE 248
PLANTATION, FL 33324

New Mailing Address:

8320 W. SUNRISE BLVD
SUITE 209
PLANTATION, FL 33322

FEI Number: 03-0569297 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MICHEL, SARNIA C
990 BLUEWOOD TERRACE
WESTON, FL 33327 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: SARNIA MICHEL
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MICHEL, SARNIA C
Address: 990 BLUEWOOD TERRACE
City-St-Zip: WESTON, FL 33327

Title: VP ( ) Delete
Name: MICHEL, PATRICK Y
Address: 990 BLUEWOOD TERRACE
City-St-Zip: WESTON, FL 33327

Title: SEC ( ) Delete
Name: MICHEL, LUC H
Address: 990 BLUEWOOD TERRACE
City-St-Zip: WESTON, FL 33327

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:

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: SARNIA MICHEL PRES 09/18/2006
Electronic Signature of Signing Officer or Director Date