

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000137844

Entity Name: TITLE PUSHERS, INC.

FILED  
Jun 17, 2009  
Secretary of State

## Current Principal Place of Business:

6980 GLENEAGLE DR.  
MIAMI LAKES, FL 33014

## New Principal Place of Business:

## Current Mailing Address:

6980 GLENEAGLE DR.  
MIAMI LAKES, FL 33014

## New Mailing Address:

FEI Number: 41-2188657

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOBERA, ALEXANDER J  
6980 GLENEAGLE DRIVE  
HIALEAH, FL 33014 US

## Name and Address of New Registered Agent:

SOBERA, ALEXANDER J  
6980 GLENEAGLE DRIVE  
MIAMI LAKES, FL 33014 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: ALEXANDER J SOBERA

06/17/2009

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: PD ( ) Delete  
Name: SOBERA, ALEXANDER J  
Address: 6980 GLENEAGLE DRIVE  
City-St-Zip: HIALEAH, FL 33014

Title: VP (X) Delete  
Name: AGUIAR, KRISTINA D  
Address: 6980 GLENEAGLE DRIVE  
City-St-Zip: MIAMI, FL 33014

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SOBERA, ALEXANDER J  
Address: 6980 GLENEAGLE DRIVE  
City-St-Zip: MIAMI LAKES, FL 33014

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

I hereby certify that the information supplied with this filing does not qualify 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: ALEXANDER J SOBERA

PD

06/17/2009

Electronic Signature of Signing Officer or Director

Date