FILED Jun 05, 2006 8:00 am Secretary of State 04-28-2006 90209 014 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P05000168220 1. Entity Name FIRST PREFERRED TITLE, INC.											
Principal Place of Business				Mailing Address			1				
6261 NW 6TH WAY STE 201				6261 NW 6TH WAY STE 201			66017896				
FT LAUDERDALE, FL 33309				FT LAUDERDALE, FL 33309			f ITOlifol me bore: Deni bern born bylin liver book itme nois men burran in 1891				
2. Principal Place of Business			3.	3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.		04242006	Chg-P	CR2E	34 (11/05)		
City & State				City & State		4. FEI Numb	45-0495	9 4 9		plied For Applicable	
Zip	Country			Zip Coun		try .	5. Certificate	e of Status Desired		\$8.75 Add	itional
6. Name and Address of Current R				stered Agent	7. Name and Address of New Registered Agent Name						
GAINES, HOWARD S 6261 NW 6TH WAY					Street Address (P.O. Box Number is Not Acceptable)						
STE 201 FT LAUDERDALE, FL 33309					[
,					City			FL	Zip Cod	•	
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.											
SIGNATURE											
- Signeture, typed or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOWILL FEE IS \$150.00 After May 1, 2008 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 OFFI	CERS AND	DIRECTOR	S (N 11
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12. I hereby certify that the information supplied with this filing does not quality 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											
SIGNATURE: My Howard S. Garrey 4/1/36 954 491-1932											