2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000027943

MIAMI, FL 33130

Entity Name: EXPERIENCED TITLE SOLUTIONS, INC.

FILED May 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1441 W. FLAGLER STREET 13365 SW 135 AVENUE MIAMI, FL 33135 104

MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

13365 SW 135 AVENUE 1111 SW 8TH STREET #210

#104

MIAMI, FL 33186

FEI Number: 20-4371906 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MITCHELL, LORY MITCHELL, LORY 1441 W FLAGLE STREET 15712 SW 145 TERRACE MIAMI, FL 33196 MIAMI, FL 33135

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: LORY MITCHELL 05/30/2007

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MITCHELL, LORY Name: Name: MITCHELL, LORY 1441 W. FLAGLER STREET Address: 15712 SW 145 TERRACE Address:

City-St-Zip: MIAMI, FL 33135 City-St-Zip: MIAMI, FL 33196

() Delete Title: VD Title: VD (X) Change () Addition

Name: VISO, EMILCI F Name: VISO, EMILCLE

1111 SW 8TH STREET, #210 Address: 13365 SW 135 AVENUE, #104 Address:

MIAMI, FL 33130 MIAMI, FL 33186 City-St-Zip: 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: LORY MITCHELL PD 05/30/2007

Electronic Signature of Signing Officer or Director

Date