

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000044862

Entity Name: E. C. TITLE SERVICES, INC.

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

1281 DOVE AVE
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

7220 NW 36 ST
528
MIAMI, FL 33166

Current Mailing Address:

1281 DOVE AVE
MIAMI SPRINGS, FL 33166

New Mailing Address:

7220 NW 36 ST
528
MIAMI, FL 33166

FEI Number: 20-4593735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LLERENA, ELENIA M
1281 DOVE AVE
MIAMI SPRINGS, FL 33166 US

Name and Address of New Registered Agent:

LLERENA, ELENIA M
7220 NW 36 ST
528
MIAMI, FL 33166 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: ELENIA LLERENA

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LLERENA, ELENIA M
Address: 1281 DOVE AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VP () Delete
Name: GRANDA, CARIDAD M
Address: 8380 NW 166 TERR
City-St-Zip: MIAMI LAKES, FL 33016

Title: T () Delete
Name: LLERENA, ELENIA M
Address: 1281 DOVE AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: S () Delete
Name: GRANDA, CARIDAD M
Address: 8380 NW 166 TERR
City-St-Zip: MIAMI LAKES, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LLERENA, ELENIA M
Address: 7220 NW 36 ST #528
City-St-Zip: MIAMI, FL 33166

Title: VP (X) Change () Addition
Name: GRANDA, CARIDAD M
Address: 7220 NW 36 ST #528
City-St-Zip: MIAMI, FL 33166

Title: T (X) Change () Addition
Name: LLERENA, ELENIA M
Address: 7220 NW 36 ST #528
City-St-Zip: MIAMI, FL 33166

Title: S (X) Change () Addition
Name: GRANDA, CARIDAD M
Address: 7220 NW 36 ST # 528
City-St-Zip: MIAMI, FL 33166

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: ELENIA LLERENA

PRES

04/23/2007

Electronic Signature of Signing Officer or Director

Date