

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000044862

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

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

7220 NW 36 ST
528
MIAMI, FL 33166

New Principal Place of Business:

7220 NW 36 ST
421
MIAMI, FL 33166

Current Mailing Address:

7220 NW 36 ST
528
MIAMI, FL 33166

New Mailing Address:

7220 NW 36 ST
421
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
7220 NW 36 ST
528
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

LLERENA, ELENIA M
7220 NW 36 ST
421
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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LLERENA, ELENIA M
Address: 7220 NW 36 ST #421
City-St-Zip: MIAMI, FL 33166

Title: VP (X) Change () Addition
Name: GRANDA, CARIDAD M
Address: 7220 NW 36 ST #421
City-St-Zip: MIAMI, FL 33166

Title: T (X) Change () Addition
Name: LLERENA, ELENIA M
Address: 7220 NW 36 ST #421
City-St-Zip: MIAMI, FL 33166

Title: S (X) Change () Addition
Name: GRANDA, CARIDAD M
Address: 7220 NW 36 ST # 421
City-St-Zip: MIAMI, FL 33166

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: ELENIA LLERENA

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date