## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000152572

Entity Name: TITLE SOLUTIONS USA, INC.

FILED May 10, 2008 Secretary of State

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

9704 SW 213 TERRACE 9704 SW 213 TERRACE

MIAMI, FL 33189 US CUTLER BAY, FL 33189 US

Current Mailing Address: New Mailing Address:

9704 SW 213 TERRACE 9704 SW 213 TERRACE

MIAMI, FL 33189 US CUTLER BAY, FL 33189 US

FEI Number: 20-8022522 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:

POLL, NELSON
9704 SW 213 TERRACE
POLL, NELSON
9704 SW 213 TERRACE

9/04 SW 213 TERRACE 9/04 SW 213 TERRACE MIAMI, FL 33189 US CUTLER BAY, FL 33189 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: 05/10/2008

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

 Name:
 POLL, NELSON
 Name:
 POLL, NELSON

 Address:
 9704 SW 213 TERRACE
 Address:
 9704 SW 213 TERRACE

City-St-Zip: MIAMI, FL 33189 City-St-Zip: CUTLER BAY, FL 33189

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

 Name:
 POLL, ROMMY
 Name:
 POLL, ROMMY

 Address:
 9704 SW 213 TER
 Address:
 9704 SW 213 TER

 City-St-Zip:
 MIAMI, FL 33189
 City-St-Zip:
 CUTLER BAY, FL 33189

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: NELSON POLL P 05/10/2008