

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000153804

FILED  
Jan 31, 2008  
Secretary of State

Entity Name: ELITE WORLD TITLE SERVICES, INC.

## Current Principal Place of Business:

260 CRANDON BLVD., SUITE 48  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

200 CRANDON BLVD., SUITE 311  
KEY BISCAYNE, FL 33149

## Current Mailing Address:

260 CRANDON BLVD., SUITE 48  
KEY BISCAYNE, FL 33149

## New Mailing Address:

200 CRANDON BLVD., SUITE 311  
KEY BISCAYNE, FL 33149

FEI Number: 20-8307214

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COHEN, IVONNE  
260 CRANDON BLVD., SUITE 48  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

COHEN, IVONNE  
200 CRANDON BLVD., SUITE 311  
KEY BISCAYNE, FL 33149 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: IVONNE COHEN

01/31/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BORELLI, PERLA M  
Address: 2700 SW 87TH AVE., SUITE B  
City-St-Zip: MIAMI, FL 33165

Title: D ( ) Delete  
Name: COHEN, IVONNE  
Address: 260 CRANDON BLVD., SUITE 48  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: SUAREZ, ILEANA  
Address: 2700 SW 87TH AVE., SUITE B  
City-St-Zip: MIAMI, FL 33165

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: COHEN, IVONNE  
Address: 200 CRANDON BLVD., SUITE 311  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: IVONNE COHEN

PRES

01/31/2008

Electronic Signature of Signing Officer or Director

Date