

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000153804

FILED
Jan 20, 2009
Secretary of State

Entity Name: ELITE WORLD TITLE SERVICES, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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

Name and Address of New Registered Agent:

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: _____

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: P () Delete
Name: COHEN, IVONNE
Address: 200 CRANDON BLVD., SUITE 311
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: () Change () Addition
Name:
Address:
City-St-Zip:

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

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date