

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102835

FILED
Apr 23, 2008
Secretary of State

Entity Name: FIRST TITLE GROUP CORPORATION

Current Principal Place of Business:

1000 PONCE DE LEON STE 113
CORAL GABLES, FL 33134

New Principal Place of Business:

9010 SW 137 AVENUE
E-220
MIAMI, FL 33186

Current Mailing Address:

1000 PONCE DE LEON STE 113
CORAL GABLES, FL 33134

New Mailing Address:

9010 SW 137 AVENUE
E-220
MIAMI, FL 33186

FEI Number: 26-1077584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERMUDEZ, KARLA D
1000 PONCE DE LEON STE 113
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

BERMUDEZ, KARLA D
9010 SW 137 AVENUE
E-220
MIAMI, FL 33186 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:

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BERMUDEZ, KARLA D
Address: 1000 PONCE DE LEON STE 113
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BERMUDEZ, KARLA D
Address: 9010 SW 137 AVENUE SUITE E-220
City-St-Zip: MIAMI, FL 33186

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: KARLA BERMUDEZ

PD

04/23/2008

Electronic Signature of Signing Officer or Director

Date