2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000001552

Entity Name: THREE OAKS TITLE CO.

FILED Apr 22, 2009 Secretary of State

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

2751 EXECUTIVE PARK DRIVE 400 N. HIATUS RD

SUITE 103 #200

WESTON, FL 33331 US PEMBROKE PINES, FL 33026 US

Current Mailing Address: New Mailing Address:

2751 EXECUTIVE PARK DRIVE 400 N. HIATUS RD

SUITE 103 #200 WESTON, FL 33331 US PEMBROKE PINES, FL 33026 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIAZ, MAITE L ESQ. DIAZ, MAITE L ESQ. 2751 EXECUTIVE PARK DR. 400 N. HIATUS RD

#103 #200

WESTON, FL 33331 US PEMBROKE PINES, FL 33026 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: MAITE DIAZ 04/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DIAZ, MAITE L ESQ.
 Name:
 DIAZ, MAITE L ESQ.

 Address:
 2751 EXECUTIVE PARK DR #103
 Address:
 400 N. HIATUS RD #200

City-St-Zip: WESTON, FL 33331 City-St-Zip: PEMBROKE PINES, FL 33026

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

 Name:
 DIAZ, ALBERTO
 Name:
 DIAZ, ALBERTO

 Address:
 2751 EXECUTIVE PARK DR #103
 Address:
 400 N. HIATUS RD #200

 City-St-Zip:
 WESTON, FL 33331
 City-St-Zip:
 PEMBROKE PINES, FL 33026

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: MAITE DIAZ P 04/22/2009