2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000076658

1. Entity Name
ALL FLORIDA TITLE COMPANY, INC.



FILED
Jan 12, 2004 08:00 AM
Secretary of State

Principal Place of Business

1995 E OAKLAND PARK BLVD

STE 310

FORT LAUDERDALE, FL 33306 | I

Mailing Address

1995 E OAKLAND PARK BLVD

STE 310

FORT LAUDERDALE, FL 33306 US

- I

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0446500

01082004

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

PDO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

MARS, BURTON H ESQ 1995 EAST OAKLAND PARK BLVD STE 310 FORT LAUDERDALE, FL 33306

the obligations of registered agent.

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8. 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. I am familiar with, and accept

SIGNATURE

Signature, typed or printed name of registered agent and site if applicable.

(NOTE: Registered Agent signature required when reinstating)

上海数 (新江州)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARS, BURTON H 1995 E OAKLAND PARK BLVD STE 310 FORT LAUDERDALE, FL 33306	The second secon		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRRS BURTON, MARS H 1995 E OAKLAND PARK BLVD STE 310 FORT LAUDERDALE, FL 33308			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN'	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	partify, that the information or collied with the filling does not qualify for the ave			

12. I hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reporting true and accurate and that my 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment withen sudgess, with all other like/empowered.

SIGNATURE:

GNAZURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8.04

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