FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000077314 (0)

EASTSIDE-WESTSIDE TITLE COMPANY

Principal Plac	e of Business	Mailing Address			L MANITORNY JANES BERNE MANITORNY MANITORNY MANITORNY	Main (mm## 61640) 41614 6181 4684
2929 E. COMMERCIAL BLVD. 2929 E. COMMERCIAL BL			BLVD.			
Suite 702 Ft. Lauderdale Fl. 33308		SUITE 702		DO NOT WRITE IN THI	IC CDACE	
FI. LAUDEND	ALE PL 33308	FT. LAUDERDALE FL	33306		3. Date Incorporated or Qualified	3 SPACE
					10/21/1994	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21		26			65-0536456	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	⊢ '''		5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State	8	City & State	<u> </u>		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Count		Trust Fund Contribution	Added to Fees
	├ ┐ ′	⊢ '	30	'Y	8. This corporation owes or has paid the o	current year Intangible
24	25 9. Name and Address of Currer	29 to Registered Agent	1301		Personal Property Tax due June 30. 10. Name and Address of New Registers	
וים	NEIL, ROBERT E	TO GOOD FIGURE		1 Name	(U. Hallio alia Madiose of Non Hogistore	4 Agont
	29 E. COMMERCIAL BLVD.					
SUITE 702			8	2 Street Addr	ress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33308			8	3		
1 1.	DIODERDACE I E SOCIO			1		
			6	4 City	F	85 Zip Code
11. Pursuant office or reagent. La	to the provisions of Sections 607.050 egistered agent, or both, in the State on familiar with and account he oblid	12 and 607,1508, Florida Sta e of Florida Such change water lations of Section 607,0505	itutes, the abo as authorized t Florida Statut	ve-named corp by the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE	on a construction of the c					
SIGNATURE	Signature, lyped or printed name of registered age	ent and title if applicable ()	NOTE Registered A	gent signature requir	red when reinslating) DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSTD DELETE		1.1 TITLE			Change Addition
NAME	O'NEIL, ROBERT E		1.2 NAM	Ε		
STREET ADDRESS	12100 CLASSIC DRIVE		13 STRE	et address		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY			
TITLE	☐ DELETE		21 TIFLE			☐ Change ☐ Addition
NAME			2 2 NAMI	I		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	T progre		2. 4 CITY			Addis-
TITLE	DELETE		3.1 TITLE	!		Change Addition
NAME			3.2 NAM	i		
STREET ADDRESS				ET ADDRESS		
CITY - ST - ZIP		DELETE	3.4. CITY+ST-ZIP			Change Addition
TITLE		L DELETE	4.1 TITLE			Change Chyoquani
NAME PERSON			4. 2 NAM	ľ	_	
STREET ADDRESS				ET ADDRESS	′	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY 5.1 TITLE			Change Addition
NAME			5.1 HILLE 5.2 NAME			C CHANGE C MUNICION
STREET ADDRESS				ET ADDRESS		
STREET ADUMESS I			■ 0.5 3 HX	riwnnuego I		1

14. Thereby certify that the information supplied with this filing does not qualify for the example on this annual report or suppliemental annual report is true and accurate at a that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation of the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address.

EET ADDRESS

Y-ST-ZIP

■ D€LET€

SIGNATURE:

CITY-ST-ZIP

CITY - ST - ZIP

NAME STREET ADDRESS

4/27/98

954-771-9501

Change

Addition

FILED

May 11 1998 8:00am

Secretary of State