

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90026 034 \*\*\*150.00

DOCUMENT # P95000015073

1. Entity Name  
PREFERRED TITLE, INC.



Principal Place of Business  
7777 GLADES ROAD  
SUITE 110  
BOCA RATON, FL 33434

Mailing Address  
7777 GLADES ROAD  
SUITE 110  
BOCA RATON, FL 33434

4004000



2. Principal Place of Business

3. Mailing Address

7777 Glades Rd

7777 Glades Rd

Suite, Apt., etc.

Suite, Apt., etc.

Suite 400

Suite 400

City & State

City & State

Boca Raton FL

Boca Raton FL

Zip

Country

Zip

Country

33434

USA

33434

USA

02222006 Chg-P CR2E034 (11/05)

4. FEI Number  
65-0561568

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHAPIRO, MICHAEL B  
7777 GLADES ROAD  
SUITE 110  
BOCA RATON, FL 33434

Name Michael B. Shapiro  
Street Address (P.O. Box Number is Not Acceptable)  
7777 Glades Rd.  
Suite 400  
City Boca Raton FL Zip Code 33434

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 the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/05/06  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME SHAPIRO, MICHAEL B  
STREET ADDRESS 7777 GLADES RD STE 110  
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE V.P. ☐ Change ☒ Addition  
NAME Jeffrey P. Wasserman  
STREET ADDRESS 7777 Glades Rd Ste 400  
CITY-ST-ZIP Boca Raton, FL 33434

TITLE D ☐ Delete  
NAME DECTOR, ANDREW M  
STREET ADDRESS 7777 GLADES RD STE 110  
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE ☒ Change ☐ Addition  
NAME 7777 Glades Rd. Ste 400  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DV ☐ Delete  
NAME BLASI, ANDREW B  
STREET ADDRESS 7777 GLADES RD STE 110  
CITY-ST-ZIP BOCA RATON, FL 33434

TITLE ☒ Change ☐ Addition  
NAME 7777 Glades Rd. Ste 400  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME Michael B. Shapiro  
STREET ADDRESS 7777 Glades Rd. Ste 400  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael B. Shapiro

4/5/06

561-477-7800  
Daytime Phone #