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

TITLE

STREET ADDRESS

officer or director of the Block 12 or Block 13 if of

SIGNATURE:

May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P95000038682 (7) **DOCUMENT #** MILESTONE TITLE & ESCROW, INC. Principal Place of Business Mailing Address 1761 W. HILLSBORO BLVD 1761 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/16/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0580290 Not Applicable Suite, Apt. #, etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 29 24 25 Personal Property Tax due June 30. ☐ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHILIAN, GERALD 1761 W. HILLSBORO BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 207 83 **DEERFIELD BEACH FL 33442** Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgnature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change NAME SCHILIAN, GERALD 1.2 NAME 1334 AVACADO ISLE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33315 CITY - ST - 7IP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 City - ST-ZIP DELETE ☐ Addition TITLE 8.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. DITY-ST-ZIP DELETE Change ☐ Addition 4 1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

DELETE

6.2 NAME

14. I hereby certify that the information supplied with this 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 annual operator or supplemental agriculture and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the colororation of the processor of the processor

PRESIDENT

GERALD SCHULAN

FILED

CR2E034 (10/97

Change

4-22-98 421-2400

■ Addition