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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 18 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000089076 (9)

UNITED TITLE LOANS, INC.								
Principal Place	e of Business	Mailing Address			I POTITORI ILE IDIAO DIAIR DUIN BOTA DELA	! <b>80</b> 10( 10110 <del>1</del> 0111 8011 1	OOM ONLINE	
513 NORTH LAKE BOULEVARD 513 NORTH LAK NORTH PALM BEACH FL 33408 NORTH PALM B								
					Date Incorporated or Qualified     10/29/1996	3a. Date of La	st Report	
2. Principal Pl	lace of Business	2a. Mailing Address	***		4. FEI Number		Applied For	
21		26	······································		65-070493		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Certificate of Status Desired	7	75 Additional	
City & State		City & State				1-84	e Required	
<b>-</b>	e				6. Election Campaign Financing Trust Fund Contribution		00 May Be ded to Fees	
<b>23</b> Zip	Country	28     Zip	Country		8. This corporation has liability for			
24	25	29	30	•		7 Yes No	CI S. 193.032,	
<del></del>	9. Name and Address of Currer			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New R	<b>X</b>		
AME	RILAWYER CHARTERED		81	Name <	TEPHEN E	6 ANI	MINAM	
343 ALMERIA AVENUE B2 Street Addre							TENTY	
CORAL GABLES FL 33134				5	12 NORTHE	aKE K	LVDM	
			83					
			84	City //	11111111	4 85	Zin Code -	
			ľ		ORTH BALM BEAC	# FL   "	33408	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Sta	stutes, the abov	e-named co	propration submits this statement for the ration's board of directors. I hereby according	purpose of changing	ng its registered	
agent. La	im familiar with, appraccept the oblig	ations of Section 607.0505	, Florida Statute	S.	lation's board of directors. Thereby acc	pruie appointmen	r de registeres	
SIGNATURE	Signature typed or princed water of registered ag	off and little if applicable (	NOTE: Registered Ag	usid	out	)(9 )		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			
TITLE	PSTD	DELETE	1.1 TITLE	1	PRESIDENT	Char	nge 🔼 Addition	
NAME	JACKSON, STEVEN A	^	1.2 NAME		ALEXANDER G. KX	MARKIN		
STREET ADDRESS	513 North Lake Boulevari   North Palm Beach Fl 3340		1	ADDRESS		ACH FC		
CITY-ST-ZIP TITLE	NORTH FALM DEACH FL 3340	DELETE	14 CITY - 1 21 TITLE	SF-ZIP	TOURTH GALM DO	ACH, FC.	nge 💹 Addition	
NAME		[ ] bitter	2.2 NAME	[3	SU AD LOS TE LA		igo <b>GC</b> I rectition	
STREET ADDRESS				T ADDRESS	CHARLOTTE FAM 513 NORTH LAN	ALUD		
CITY-ST-ZIP			2.4 CITY -	1	NORTH PALM B		7	
TOLE		DELETE	3.1 TITLE	31-211	WO KIN INGS	Char	nge Addition	
NAME			3.2 NAME					
STREET ADORESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		DELETE	4.1 TITLE			Char	nge 🔲 Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS	And the second of the second o		,	
CITY - ST - ZIP			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Char	nge [_] Addition	
NAME			5.2 NAME	ļ				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		T on the	5.4 CITY-	ST-ZIP		. 176-	nga Addisin-	
TITLE		DELETE	6.1 TITLE	l		L. Char	nge L Addition	
NAME CZOTEZ ADORECC			6.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-S1-ZIP	by certify that the information supplie	ed with this filing does not a	6.4 CITY- ualify for the ex		led in Section 119.07(3)(i), Florida Statu	es. I further certify	that the	
informatio	on indicated on this annual report or	supplemental annual report or the receiver or trustee em	is true and acc powered to exe	urate and th	nat my signature shall have the same legort as required by Chapter 607, Florida	al effect as if made	e under oath; that	