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Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P 96000099073

1. Corporation Name

Universal Title Company, Inc.

Principal Place of Business

Mailing Address

1521 Island Way
Weston, Fl. 33326

2. Principal Place of Business

2a. Mailing Address

21. Same

2a. Same

State, Apt. #, etc.

State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

ArtoVistus P. Lundy
20305 NW 3rd Court
Miami, Fl. 33169

10. Name and Address of New Registered Agent

81. Name AL Yoriene
82. Street Address (P.O. Box Number is Not Acceptable)
1521 Island Way
83.
84. City Weston FL 85. Zip Code 33326

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 filing with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE AL Yoriene

(NOTE: Registered Agent signature required when reinstating)

4/23/97

12. OFFICERS AND DIRECTORS

TITLE	President, Secretary, Treasurer	DELETE
NAME	AL Yoriene	
STREET ADDRESS	1521 Island Way	
CITY, ST, ZIP	Weston, Fl. 33326	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		Change	Addition
12 NAME			
13 STREET ADDRESS			
14 CITY, ST, ZIP			
21 TITLE		Change	Addition
22 NAME			
23 STREET ADDRESS			
24 CITY, ST, ZIP			
31 TITLE		Change	Addition
32 NAME			
33 STREET ADDRESS			
34 CITY, ST, ZIP			
41 TITLE		Change	Addition
42 NAME			
43 STREET ADDRESS			
44 CITY, ST, ZIP			
51 TITLE		Change	Addition
52 NAME			
53 STREET ADDRESS			
54 CITY, ST, ZIP			
61 TITLE		Change	Addition
62 NAME			
63 STREET ADDRESS			
64 CITY, ST, ZIP			

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***165.00

14. I do 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 report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an affidavit.

SIGNATURE: AL Yoriene, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF FORMING OFFICER OR CLERK OR

4/23/97 305-948-2346

Date (Type Name)

CPCE034 (9/96)