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 # P97000018147 (3)

FILED Aug 05 1998 8:00am Secretary of State

CENT	JRY TITLE CORP.					
Principal Plac	ce of Business	Mailing Address			{	
101925 OVERSEAS HIGHWAY 101925 OVERSEAS HI			AS HIGHWAY			
KEY LARGO FL 83037 KEY LARGO FL 3303			33037			
					DO NOT WRITE	IN THIS SPACE
					3. Date Incorporated or Qualified	i
9 Principal F	Place of Business	2a. Maiting Addre	200		02/26/1997 4. FE! Number	I A - li- d F
21		26 Making Acture	 1		65-0740 853	Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			60.75
22		27	<u></u>		5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	7 ₁ p	<u> </u>	untry	8. This corporation owes or has paid	
24	25	29	30	 	Personal Property Tax due June :	
-	9. Name and Address of Curre	eur ueðisteten viðeut		B1 Name	10. Name and Address of New Reg	ingrened Agent
	AVID, CHRISTOPHER M 128 BRICKELL AVENUE					
	TH FLOOR			82 Street Addre	ess (P.O. Box Number is Not Acceptable	e) — ——————————————————————————————————
	IAMI FL 33131		,	83		
	PHW 1 E 00 10 1					
				84 City		FL 85 Zip Code
11, Pursuant	to the provisions of Sections 607.05	502 and 607,1508, Florid	a Statutes, the a	LL bove-named corp	oration submits this statement for the pu	roose of changing its registered
office or i	registered agent, or both, in the Stat am f amil iar with, and accept the obli	te of Florida. Such chang igations of, Section 607.0	ge was authorize 0505. Florida Sta	d by the corporati tutes.	ion's board of directors. I hereby accept	the appointment as registered
SIGNATURE	The control of the co	gament of pacific port				
SIGNATORE	Signature, typed or printed name of registered a	agent and little if applicable	(NOTE: Registere	d Agent signature require	ed when reinstating)	DATE
12,		ND DIRECTORS	13.	<u></u>	ADDITIONS/CHANGES TO OFFICE	
TITLE	Ares	L. DE				L. Change L. Addition
NAME PAREZ INDOCCO	Scott Nymen		1.2 N			
STREET ADDRESS CITY-ST-ZIP	1024 Dive Re.	73037		TREET ADDRESS		
TITLE	Scott Nymen 1024 Dive Red Key Longo 15-C	DE		ITY-ST-ZIP		Change Addition
NAME	George Mymen		22 N			
STREET ADDRESS	AR Tarks			TREET ADDRESS		ļ
CITY-ST-ZIP	key Lango, Fl.	33037	. IBi	CITY - ST - ZIP		
TITLE		DEI				Change Addition
NAME			3.2 N	IAME		
STREET ADDRESS			3.3 S	TREET ADDRESS		
CITY-ST-ZIP				CITY - S1 - ZIP		
TITLE		☐ DEI				Change Addition
NAME			4.21			
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP		DEI		ITY-ST-ZIP		Change Addition
NAME			5.2 N			
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP			•	ITY - ST - ZIP		
TITLE	- 	☐ DE				☐ Change ☐ Addition
NAME			6.2 N			
STREET ADDRESS			6.3 S	TREET ADDRESS		
CITY-ST-ZIP				ITY - ST - ZIP		
44 bereby	cartifu that the information counting	with this bling door not	qualify for the ev-	omption stated in	Section 119 07(3)(i) Florida Statutas I f	urther certify that the information

The body comy that the information supplied with this timing does not quality for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further **cert**ify that the informatio 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 address.