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

# PROFIT CORPORATION ANNUAL REPORT **19**98 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

#### Sandra'B. Mortham

Secretary of State DIVISION OF CORPORATIONS

# P97000034607 (6)

### **BRITISH LAND TITLE CORPORATION**

118 N.W. 85TH COURT 118 N.W. 85TH COURT MIAMI FL 33126 MIAMI FL 33126	i inatitaat iin intii taati aatiti natiti aatiti natida (ilit aigin attii dattii eesi ensi
MINMI FE 20120 MINMI FE 20120 :	
MICHINI LE GOLEA	DO NOT WRITE IN THIS SPACE
<b>3.</b> D	ate Incorporated or Qualified
	04/17/1997
	El Number Applied For
	65-0745253 Not Applicable
Suite, Apt. #, etc.  Suite, Apt. #, etc.	ertificate of Status Desired   \$8.75 Additional Fee Regulred
2	
, '   <b>"</b>	ection Campaign Financing \$5.00 May Be ust Fund Contribution Added to Fees
	his corporation owes or has paid the current year Intangible
	ersonal Property Tax due June 30. 🗗 Yes 🔲 No
g. Name and Address of Current Registered Agent 10. N	ame and Address of New Registered Agent
DIEGO, EMENE	
118 N.W. 85TH COURT 82 Street Address (P.O.	. Box Number is Not Acceptable)
MIAMI FL 33126	A STATE OF THE STA
83	
84 City .	85 Zip Code
	FL 33793
<ol> <li>Pursuant to the provisions of Sections 697.0502 and 607.1508, Florida Statutes, the above-named corporation's office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's boat</li> </ol>	submits this statement for the purpose of changing its registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	and or directors. I moreby accept the appointment as registered
SIGNATURE	6/15/78
Signature: typest or presest name of registered agent and applicable. (NOTE: Registered Agent signature required when rem	
	DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PSDT LITTLE PSDT NAME DIEGO, ANGEL M 12 NAME DIEGO	
STREET ADDRESS 118 N.W. 85TH COURT 13 STAFFEL ADDRESS 1.8 N.	W 85 TH COUNT 11, FL. 33126
STREET ADDRESS 118 N.W. 85TH COURT 13 STREET ADDRESS 14 CHY-SI-ZIP 14 CHY-SI-ZIP 14 CHY-SI-ZIP 14 CHY-SI-ZIP	W 63 (R ======
CITY-ST-ZIP         MIAMI FL 33126         14 CITY-ST-ZIP         MIAMI FL 33126           TITLE         DELETE         2 1 TITLE	Change Addition
NAME 22 NAME	E Charle E Manton
STREET ADDRESS 2.3 STREET ADDRESS	
2.3 STREET ADDRESS	
OTV 61 7ID	
CITY-ST-ZIP	Change Addition
TITLE DELETE 3.1 TITLE	Change Addition
TITLE DELETE 3.1 THIE NAME 32 NAME	Change Addition
TITLE         DELETE         3.1 TITLE           NAME         3.2 NAME           STREET ADDRESS         3.3 STREET ADDRESS	Change Addition
TITLE DELETE 3.1 TITLE NAME 32 NAME	Change Addition
TITLE         DÉLÉTE         3.1 TITLE           NAME         3.2 NAME           STREET ADDRESS         3.3 STREET ADDRESS           CHY-ST-ZIP         3.4 CHY-ST-ZIP	

6 4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 supplied edited an interest 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.

4.4 CITY - ST - 7IP

5 3 STREET ADDRESS

6.3 STREET ADDRESS

54 CHY-ST-7/P

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELFTE

BOODDESSESTIS

-06/23/99 - 01053 - -042

\*\*\*150.00

Change

Change

Addition

**FILED** 

Jun 22 1998 8:00am

Secretary of State