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

TITORS CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000040923 (9)

INFINITY PROFESSIONAL SOLUTIONS, INC.

FILED Jan 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 rancemai ien entet ennet matri mbret matri mbret mint mint bill in			
	PARK PLACE #100	310 SABLE PARK PLACE	310 SABLE PARK PLACE #100						
LONGWOOD	FL 32779	LONGWOOD FL 32779			DO NOT WEITE IN THE OR A C				
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						05/08/1997			
<u> </u>	Principal Place of Business 2a. Mailing Address					4. FEI Number		1	Applied For
21		26				59-3445061		1	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	П		Additional	
22		27				or our mode of classo because		Fee F	Required
City & Stat	e	City & State			6. Election Campaign Financing		\$5.00	О Мау Ве	
23		Zip Country			Trust Fund Contribution		Added	to Fees	
Zip				try		8. This corporation owes or has paid	the curre	ent year Ir	<u>nta</u> ngible
24	25	[29]	30			Personal Property Tax due June 3			⊠ No
Name and Address of Current Registered Agent						10. Name and Address of New Regi	stered A	gent	
DANNEL, JEFFERY C				31	Name				
310 SABLE PARK PLACE #100			Īε	32	Street Addre	ss (P.O. Box Number is Not Acceptable	1		
LO	NGWOOD FL 32779					55 (1.15) 25/1/12/150 (5.15(1.155)piasic	,		
1			ε	33					
			_	_					
			18	34	City		FL.	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statut	es, the abo	N/e	-named corpo	ration submits this statement for the pur	nose of c	handing	its registered
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.									
	m amiliar with, and accept the oblig	gations of, Section 607.0505, Fit	orida Statul	ies.					
SIGNATURE	Signature, typed or printed name of registered ag	cost and tills if applicable. (NOT	E. Doeleloued (nt signature required	1han	D. T.		
12. OFFICERS AND DIRECTORS 13.					it signature required	ADDITIONS/CHANGES TO OFFICE	DATE DO AMON	NECTO	DC IN 10
TITLE			_	1.1 TITLE P				Change	Addition
NAME	DANNEL, JEFFERY C			1,2 NAME		O .	7	M Change	E Addition
STREET ADDRESS 310 SABLE PARK PLACE #100			· ·	i I					
LOUGHTOOP W. COMMO				1.3 STREET ADDRESS					;
CATY-ST-ZIP TATLE	D	NA per ere	1.4 CITY		- ZIP			7 01	
	_			2.1 TITLE			Ł	Change	Addition
NAME	FOWLER, BOB		2.2 NAM						
STREET ADDRESS	485 SILVER OAK BLVD		2.3 STRE	2.3 STREET ADDRESS					
CITY-ST-ZIP				2. 4 CITY - ST - ZIP					
TITLE	☐ DELETE		3.1 TITLE	3.1 TITLE V.		S PRESIDENT/ DIRECTOR	_ L	Change	
NAME			3.2 NAM	E	Lac	S A PAGAN			
STREET ADDRESS			3.3 STRE	ET A	ODDRESS 203	4 BRIDGEVIEW CIRC	LE		
CITY-ST-ZIP			3.4. CITY	- ST	-ZIP OR	CANDO FL 32824			
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4, 2 NAM	ΙE	İ				
STREET ADDRESS			4,3 STRE	ET A	ODRESS				
CITY-ST-ZIP			4.4 CITY						
TITLE		DELETE	5.1 TITLE					Change	☐ Addition
NAME			5.2 NAME				-	_ onlinge	
STREET ADDRESS			5.3 STRE		DODESS				
1									
CITY-ST-ZIP TITLE		DELETE	5.4 CITY		· ZIP			T Change	Addition
		T) SECER	6.1 TITLE		1		L	Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	et ai	DDRESS				ļ
CITY-ST-ZIP 6.44									
14. I hereby c	ertity that the information supplied w	ith this filling does not qualify to	r the exem	ptic	on stated in Se	ection 119.07(3)(i), Florida Statutes. I fur	ther certi	ly 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 address.

SIGNATURE:

1/6/98