

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000071155

FILED
Apr 16, 2004
Secretary of State

Entity Name: FIRST HOME TITLE OF MIAMI, INC.

Current Principal Place of Business:

10705 SW 104 ST
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

10705 SW 104 ST
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0777121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, ROBERTA H
10705 SW 104 ST
MIAMI, FL 33176

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MORRISON, ROBERTA H
Address: 18425 SW 200 STREET #300
City-St-Zip: MIAMI, FL 33187

Title: VD () Delete
Name: MORRISON, ROBERT G
Address: 9300 S. DADELAND BLVD #201
City-St-Zip: MIAMI, FL 33156

Title: CEO () Delete
Name: STUCKER, ROBERT E
Address: 9300 S DADELAND BLVD
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MORRISON, ROBERTA H
Address: 6420 SW 147 TERRACE
City-St-Zip: CORAL GABLES, FL 33158

Title: VD (X) Change () Addition
Name: MORRISON, ROBERT G
Address: 6420 SW 147 TERRACE
City-St-Zip: CORAL GABLES, FL 33158

Title: VD (X) Change () Addition
Name: WEISS, DANIEL A
Address: 150 W. FLAGLER ST. PENTHOUSE
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. MORRISON

PRES

04/16/2004

Electronic Signature of Signing Officer or Director

Date