2003 FOR PROFIT CORPORATION

FILED Apr 11, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P98000107457 DOCUMENT # 1. Entity Name 04-11-2003 90221 030 ***150.00 ONE GUY TITLE SERVICES, INC. Principal Place of Business Mailing Address 811 EAST HILLSBORO BLVD. 811 EAST HILLSBORO BLVD. DEERFIED BEACH FL 33441 DEERFIED BEACH FL 33441 2. Principal Place of Business 3. Mailing Address 881 NE 26 Street ઉકા Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Sunt Applied For City & State City & State 4. FEI Number 65-0884388 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired () SA 3*330*5 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent EWING, GUY Street Address (P.O. Box Number is Net Acceptable) 811 E HILLSBORO BLVD **DEERFIELD BEACH FL 33441** Manors 8. 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. I am familiar with, and accept the obligations of registere Guu Ewing Presiden SIGNATURE (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition ☐ Delete Change TITLE TITLE EWING, GUY NAME NAME 1881 NE ZG Street, Suite 40 811 E HILLSBORO BLVD STREET ADDRESS STREET ADDRESS Wilton Manors, FL **DEERFIELD BEACH FL 33441** CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE □ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with a address, with all other like empowered

CITY-ST-ZIE

SIGNATURE:

CITY-ST-ZIP