

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90038 044 ***550.00

DOCUMENT # P99000005175				<div style="font-size: 2em;">✓</div>	
1. Entity Name International Title Corp.					
Principal Place of Business 1221 Brickell Avenue Miami, FL 33131		Mailing Address 1221 Brickell Avenue Miami, FL 33131			
2. Principal Place of Business 1221 Brickell Avenue Suite, Apt. #, etc. Attn: Dir of Finance City & State Miami, FL Zip 33131 Country USA		3. Mailing Address Brickell Avenue Suite, Apt. #, etc. Attn: Dir of Finance City & State Miami, FL Zip 33131 Country USA		<div style="font-size: 1.5em;">A0079207</div>	
4. FEI Number 65-0890211		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent Juan P. Loumiet 1221 Brickell Avenue, 24th Floor Miami, FL 33131-3258			7. Name and Address of New Registered Agent Name Richard Garrett Street Address (P.O. Box Number is Not Acceptable) 1221 Brickell Avenue Suite 2100 City Miami FL Zip Code 33131		
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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		<div style="border: 1px solid black; padding: 2px;"> FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State </div>		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D, P Juan P. Loumiet 1221 Brickell Avenue Miami, FL 33131 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Nancy B. Lash 1221 Brickell Avenue Miami, FL 33131 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.					
Nancy B. Lash, Vice President & Secretary					
SIGNATURE: _____		9/13/00		(305) 579-0500	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

CR2E034 (9/99)