2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000054406

Entity Name: PARAMOUNT TITLE SERVICES, INC.

FILED Mar 07, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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% KENNETH F. COMMETTE 7515 W OAKLAND PARK BLVD 33 NORTHEAST 2ND ST SUITE 210 SUITE 100

FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33319

Current Mailing Address: New Mailing Address:

% KENNETH F. COMMETTE 33 NORTHEAST 2ND ST SUITE 210 7515 W OAKLAND PARK BLVD SUITE 100 FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33319

FEI Number: 65-0927638 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

COMMETTE, KENNETH F SOULE, JAMES L 3581 SIMMS STREET 7515 W OAKLAND PARK BLVD HOLLYWOOD, FL 33021 US 100 FORT LAUDERDALE, FL 33319 US

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: JAMES L SOULE 03/07/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PVPT** () Delete Title: (X) Change () Addition COMMETTE, KENNETH F Name: Name: LEAL, ELIANA M 7515 W OAKLAND PARK BLVD #100 33 NE 2ND STREET Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33319

Title: Title: () Delete () Change () Addition WOLFE, REBECCA J Name: Name:

33 NE 2ND ST Address: Address: FORT LAUDERDALE, FL 33301 City-St-Zip: City-St-Zip:

() Change (X) Addition Title: Title: () Delete VΡ

COMMET, KENNETH Name: Name:

7515 W OAKLAND PARK BLVD #100 Address Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33319

Title: () Delete Title: () Change (X) Addition

SOULE, JAMES L Name: Name:

Address: Address: 7515 W OAKLAND PARK BLVD #100 City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33319

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119 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: JAMES L SOULE D 03/07/2007