## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT  1. Corporation Name	#

V32391

(7)

GENESIS TITLE CORP.

Principal	Place of	Business

Mailing Address

7171 CORAL WAY SUITE 211

7171 CORAL WAY SUITE 211



MIAMI FL 3	3155	MIAMI FL 33155	_ •						
Principal Place of Business					04/29/1992 08			of Last Report 3/07/1995	
2. Frincipal F	1ace of Business	2a. Mailing Address			4. FEI Number 65-0326668		Ĺ	Applied For	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			03-0320000			Not Applicable	
22		27			5. Certificate of Status Desired			75 Additional ee Required	
City & Stat		28	City & State		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country	Zip	Count	try	8. This corporation has liability for in	ntangible tax	unde	s 199.032,	
24	9. Name and Address of Curre	pt Posistaved Appet	30		Florida Statutes  Yes				
<u> </u>	s. rame and Address of Curre	nt negistered Agent		1 Name	10. Name and Address of New Ro	egistered A	gent		
SANCH	EZ, LUCIA		`	Ivame					
	W 128 AVE		8	2 Street A	ddress (P.O. Box Number is Not Acceptable	e)			
	TL 33175			3			<b>-</b>		
IAITAINII L	-1 33173		•	3					
			8	4 City			85	Zip Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1509 Florida Ctal to-	Ab 1			<u> </u>	1 1		
or register familiar wi	red agent, or both, in the State of Flori th, and accept the obligations of, Sect	da. Such change was authorized tion 607.0505, Florida Statutes.	by the co	poration's b	poration submits this statement for the purp oard of directors. I hereby accept the appo	ose of chan intment as re	ging it egister	s registered office ed agent. I am	
SIGNATURE .	Signature typed or printed name of registered again	and little if analysation to the Core			r∕ed when renstating				
12.		D DIRECTORS	13.	Bill signature req		DATE	VIDE 0	5550	
TITLE	PD	☐ DELETE	1. 1 T/TL	· · · · · · · ·	ADDITIONS/CHANGES TO OFFIC		Chano		
NAME	SANCHEZ, LUCIA	_	1.2 NAMI			Ш	Unany	E MOUNDON	
STREET ADDRESS	3630 SW 128 AVE			ET ADDRESS					
CiTY-ST-ZiP	MIAMI FL 33175		14 CITY						
TITLE	VD	T) DELETE	2 1 THTLE				Chang	Addition	
NAME	MARTINEZ, OLGA		2 2 NAME	i		ы	Unang	Addition	
STREET ADDRESS	3630 SW 128TH AVE			T ADDRESS					
CHTY-ST-ZIP	MIAMI FL		2 4 CITY					,	
TITLE	SYD	DELETE	3 1 TITLE				Change	Addition	
NAME	Martinez, olga		3.2 NAME			U	onang.	, L Addition	
STREET ADDRESS	3630 SW 128 AVE		33 STRE	ET ADDRESS					
CITY - S1 - ZIF	MIAMI FL 33175		3 4 CITY -						
TITLE		DELETE	4. 1 TITLE				Change	Addition	
NAME			4.2 NAME			•			
STREET ADDRESS			43 STREE	T ADDRESS				ļ	
CITY - ST - ZIP			4.4 CITY-						
THELE		☐ DELE1E	5. 1 TITLE				Change	Addition	
NAMÉ			5 2 NAME	ļ		_		E. J. Tooling	
STREET ADDRESS			5.3 STREE	T ADDRESS				i	
CITY - ST - 7IP			5.4 CITY-	ST-21P					
TILE		☐ DELETE	6 1 TITLE				Change	Addition	
NAME			6.2 NAME	ļ			go		
STREET ADDRESS			6.3 STREE	T ADDRESS					
CITY - ST-ZIP			6.4 CITY-	-					
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify 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 cath; 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.