## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

**FILED** Mar 31 1998 8:00am Secretary of State

SOUTH	iland ti	rle services, inc	•						I 188M BURBI BHIR DIRM BIRIC BINIR BIRI BIRIN BI	<b>a</b> n anni alan ak	I	
··										JAN ARRY BIRK BY	1)	
Principal Place of Business				Mailing Address						h 6.4 4.4 4.4		
800 CORPORATE DRIVE				800 CORPORATE DRIVE								
SUITE 602 FT. LAUDERDALE FL 33334				SUITE 602 FT. LAUDERDALE FL 33334					DO NOT WRITE IN THI	S SPACE		
US				US					3. Date Incorporated or Qualified			
•			-						07/13/1992		1	
2. Principal P	lace of Busin	ness	2a. M	2a. Mailing Address					4. FEI Number	A	pplied For	
21	-	<del></del>	26				ì	65-0359400	<del></del>	lot Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.							Additional	
22				27					5. Certificate of Status Desired		beriupei	
City & State				City & State					6. Election Campaign Financing	\$5.00	) May Be	
23			28						Trust Fund Contribution		I to Fees	
Zip		Country	Zı	р	Cou	intry			8. This corporation owes or has paid the o	urrent year Ir	tangible	
24		25	29		30	7			Personal Property Tax due June 30.		□ No	
g. Name and Address of Current I				egistered Agent			10. Name and Address of New Registered Agent			d Agent		
	imark, co					81	Name				<u> </u>	
	o Corpor	ate drive				82	Street	Addres	ss (P.O. Box Number is Not Acceptable)			
SUITE 602									<u> </u>			
' FT.	. Lauderd	ALE FL 33334				<b>B</b> 3						
						84	City	——		<b>85</b> Zip	Code	
	<del></del>	10 11 10 10 10 10 10 10 10 10 10 10 10 1							F			
11. Pursuant	to the provis realstered ac	ions of Sections 607.0502 ent. or both, in the State o	and 607. If Florida.	1508, Florid <b>a S</b> tatuti Such change was a	es, the al	bove d by	-named the con	corpor poratio	ration submits this statement for the purpose n's board of directors. I hereby accept the a	of changing on on the change of the change o	its registered s registered	
agent. I a	ım familiar w	th, and accept the obligat	ions of, S	ection 60 <b>7.050</b> 5, Flo	rida Stat	ules			· · · · · · · · · · · · · · · · · · ·			
SIGNATURE												
	Signature, typed	or product name of trigisterior agent OF FICERS AND			Registere	d Age	nt signature	required	when reinstating) DATE	NO DIDECTO	<del></del>	
TITLE	PD	OFFICENSAND	DINLOTO	DELETE	1.1 Tr	. — — T) F		<del></del> -	ADDITIONS/CHANGES TO OFFICERS A	Change	L Addition	
NAME	,	HOWARD B.		C. J. D. C. C.	1.2 N					Ja onango		
STREET ADDRESS		RPORATE DRIVE #602					ADDRESS	0~	Corporate Dr., Ste.	U2/	8	
CITY-ST-ZIP		AUDERDALE FL				TY - S1		ou	Corporate Day of			
TITLE	VO			DELETE	2.1 [		1-615	-		Change	Addition	
NAME	'-	K, CORT A.			2.2 N/			•	_	_ •	***************************************	
STREET ADDRESS		RPORATE DRIVE, SUIT	F 602				ADDRESS	800	corporate Dr., Ste. 4	120		
CITY-ST-ZIP		DERDALE FL			2.40							
TITLE	SD			DELETE	3.1 TI		1-64			Change	Addition	
NAME		HOWARD B			3.2 N/			ĺ		~		
STREET ADDRESS		RPORATE DRIVE, SUIT	E 602				ADDRESS	80	corporate Dr., St	e.420	,	
CITY-ST-ZIP		DERDALE FL			3.4. C				10. FC. 11. C CA ) U		1	
TITLE	TD			DELETE	4.1 T)		. 411	<u> </u>		Change	Addition	
NAME	, :-	E. MICHAEL E		-	4. 2 N			1			_	
STREET ADDRESS		RPORATE DRIVE, SUIT	E 602				ADDRESS					
CITY-ST-ZIP		DERDALE FL			4.4 CI			1			1	
TITLE				DELETE	5110		211			Change	Addition	
NAME					5.2 NA			ł				
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					5.4 CI			1				
TITLE				DELETE	6.1 Tr		£11	<del> </del>		Change	Addition	
NAME				<del></del>	6.2 NA							
STREET ADDRESS	l				- 2		ADDRESS				ł	
CITY+ST-ZIP					6.4 CI							
	certify that th	e information supplied wit	n this filing	does not qualify fo				ed in Se	ection 119.07(3)(i), Florida Statutes. I further	certify that the	e information	

indicated on this annual report or supposed wire this fining does not quality for the exemption stated it section 113.07(3)(i), Fibrida Statutes. Further certify that the Informatic indicated on this annual report or supposed when the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver provides empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing, or on an ayochren built an address.

**SIGNATURE:** 

3/20/98

954-493-8000