▶ 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

SIGNATURE AND

May 04, 2006 8:00 am Secretary of State DOCUMENT #V58838 05-04-2006 90246 010 ***150.00 1. Entity Name ROYAL TITLE & ESCROW COMPANY, INC. Principal Place of Business Mailing Address 50018491 555 NE 15TH ST 555 NE 15TH ST STE 100 STE 100 MIAMI, FL 33132 MIAMI, FL 33132 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-0346794 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RITTER, JOHN Street Address (P.O. Box Number is Not Acceptable) 555 NE 15TH ST **STE 100** MIAMI, FL 33132 City Zip Code 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 registered agent SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. DPS TITLE Delete TITLE \wedge ☐ Change Addition RITTER, JOHN A NAME NAME JAIME, VIVIAN A. STREET ADDRESS 555 NE 15 STREET, STE 100 555 NE ISH ST, STE 100 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP MiAM: FL. 33132 TITLE DVT ☐ Delete TITLE □ Change ☐ Addition NAME ZARETSKY, LOUIS D NAME STREET ADDRESS 555 NE 15 STREET, STE 100 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP TITLE D۷ □ Delete TITLE Change ■ Addition NAME RITTER, CONRAD NAME STREET ADDRESS 555 NE 15 STREET, STE 100 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP TITLE DV ☐ Delete TITLE □ Change ■ Addition HERNANDEZ, HILDA NAME NAME STREET ADDRESS 555 NE 15 STREET, STE 100 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PALACIOS, BARBARA NAME NAME STREET ADDRESS 555 NE 15 STREET, STE 100 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LIEBER, OREN NAME NAME STREET ADORESS 555 NE 15 STREET, STE 100 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empoyered.

FILED

Daytime Phone #