2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILLÚ SECRETARY OF STATE DIVISION OF CORPORATIONS

DOCU 1. Entity Nam TITAN MA	ne					04 APR (30 PI	4 3: 52	2		
Principal Plac 3680 INVES RIVIERA BEA	TMENT LANG	E, SUITE 1	Malling Address 3680 INVESTMENT LANE, SUITE 1 RIVIERA BEACH, FL 33404								·
2. Principal P c/o Bari		ess inagement	Mailing Address C/O Myp								
Suite, Apt	#, etc	l., Ste. 109	Suite, Apt #, etc 2434 No. Harlem Ave., Ste. I			te. B 042	72004	Chg-LLC	CR2E	083 (10/03)	
City & Stat	-	DT.	City & State Elmwood Park, IL			4. F	El Numbe	er .			ot Applicable
Zip 33404	viera Beach, FL Country U.S.		Zip Co		ountry U.S.		ertificate	of Status Desired		\$5.00 Ad Fee Require	ditional
	6. Name	and Address of Current i	Registered Agent			7. Na	ame and	Address of New F	legistered	Agent	
SPEDLING	E MANAGE	EMENT GROUP, LLC	•		Nama Sperl:	ing Mana	.gemei	nt Group,	LLC		
C/O BARN	IETT MAN	IAGEMENT	•	Ştreet Address (P O Box				er is Not Acceptable			
3680 INVE		LANE, SUITE 1 . 33404 •	<u> </u>				tt Management				
		- 50 (67)	7289 Gard				en Road, Ste. 109				
8. The shows	named entit	y submits this statement for	he purpose of changing its	ranieter	Rivie	ca Beach	nt or bot	h in the State of Fle	Fi	3340	14
	ions of regist	ered agent SPERIA	NG MANAGEMENT	GBOU.	P, LL	C., a Fl	orida	a limited	liabi	lity co	pmpany
SIGNATURE	3у:	J'W	UH LAMPI	<i>~</i>	_			4	- 20	-2004	
		or printed name of registered agent a el S. Barnett	Managing Mem		d Agent signatu	re required when rein	stating)	4.4 (1941) (44(19))	DATE a) g (S-Sa) s	A ROBERT A	Taranagasa
	iling Fee i ue by May	s \$50.00								payable to nent of Stat	
9.	· · · · · · · · · · · · · · · · · · ·	MANAGING MEMBER	RS/MANAGERS	10.				ADDITIONS	CHANGE		
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CITY-ST-ZIP				CITY				. FL 334			
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name Street address	J			NAMI STRE	E et address		05/0)6/04 010	1050	106 **	75.00
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TITLE			☐ Delete	TITLE						☐ Change	Addition .
NAME STREET ADDRESS	3-			NAM! STRE	E et address		f_i	. ^			
CITY-ST-ZIP				CITY	-ST-ZIP	· ·	JM)	14			
TITLE	4		☐ Delele	TITLE	1		-U	\mathcal{M}		Change	Addition
NAME STREET ADDRESS				NAMI STRE	E Et address						Ì
CITY-ST-ZIP	1				-ST-ZIP		,				
indicated limited tla	on this report bility compar RLING M	rt is true and accurate and ny or the receiver or trustee IANAGEMENT GRO	this filling does not qualify for that my signature shall have empowered to execute this UP, LLC, a Flo	the same report as	e legal effe required b	ct as if made un by Chapter 608,	ider oath; Florida S	that I am a mana; Statutes			
SIGNAI	SIGNATURE	AND TYPED OR PRINTED NAME OF	SIGNING MANAGING MEMBER, MAI	NAGER, OR	AUTHORIZED	REPRESENTATIVE		Date		Daytime Phone #	