

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M90735

FILED
Oct 06, 2006
Secretary of State**Entity Name:** TITAN MARKETING GROUP, INC.**Current Principal Place of Business:**2253 LARAMIE DRIVE
LAS CRUCES, NM 88011 US**New Principal Place of Business:**2987 LONG BOW LOOP
LAS CRUCES, NM 88011 US**Current Mailing Address:**PO BOX 16197
LAS CRUCES, NM 88004 US**New Mailing Address:****FEI Number:** 59-2909047 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**FLORIDA INCORPORATORS, INC.
1221 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131 US**Name and Address of New Registered Agent:**FLORIDA INCORPORATORS, INC.
8875 HIDDEN RIVER PARKWAY
SUITE 300
TAMPA, FL 33637 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:

Electronic Signature of Registered Agent

10/06/2006

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BALLARD, GALEN O.
Address: 2253 LARAMIE DRIVE
City-St-Zip: LAS CRUCES, NM 88011

Title: VSD () Delete
Name: BROOKS, MARYANN
Address: 2253 LARAMIE DRIVE
City-St-Zip: LAS CRUCES, NM 88011

Title: CD () Delete
Name: MELLON, R. BRADFORD,
Address: #20 SURREY RIDGE
City-St-Zip: CASTLE ROCK, CO

Title: D () Delete
Name: REID, JAMES D
Address: 4010 S. BLUE RIVER COVE
City-St-Zip: HOMOSASSA, FL 34448

Title: D () Delete
Name: GREGORY, DR. STEWART
Address: 629 ROCK SHADOW COURT
City-St-Zip: STONE MOUNTAIN, GA 30087

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: BALLARD, GALEN O.
Address: 2987 LONG BOW LOOP
City-St-Zip: LAS CRUCES, NM 88011

Title: VSD (X) Change () Addition
Name: BALLARD, MARYANN
Address: 2987 LONG BOW LOOP
City-St-Zip: LAS CRUCES, NM 88011

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GALEN O. BALLARD

Electronic Signature of Signing Officer or Director

PRES

10/06/2006

Date