2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED
May 25, 2006 8:00 am
Secretary of State
05-25-2006 90015 012 ***150.00

DOCUMENT : 1. Entity Name	P020000415	27						
i. Endry Hains				1	/			
INVESTMENTS TITANIUM INC					1			
		E IN THIS S			40094361			
2. Principal Place of Business 3. Mailing Add 7999 NW 53 STREET, SUITE 2 7999 NW 53 ST		3. Mailing Address 7999 NW 53 STREE	SSS REET SUITE 2					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4	4. FEI Number		Applied For	
DORAL, FL	·	DORAL, FL			-3644338		Not Applicable	
Zip 33166	Country	Zip 3316	Country	5	. Certificate of Status Desired		\$8,75 Additional Fee Required	
33.100				. Name s	nd Address of Current R	egiste		
			Nar	ne				
DO NOT WRITE			Stre	DANIEL H. HURTADO Street Address (P.O. Box Number is Not Acceptable)				
	N THIS SF	ACE	7999 N	W 53 STI	REET			
							_	
			City		F		Zip Code 33166	
8. The above named	entity submits this	statement for the pur nd accept the obligation	pose of changi	ng its regi	stered office or registered a	igent, c	or both, in the	
1	am lamiliar with, ai		•	•				
		of registered agent and title	L H. HURTADO If applicable. (NO		d Agent signature required when re	einstaling) DATE	
	- May 1 Fee to \$150 ay 1, Pee to \$550.00				. Election Campaign Financing		\$5.00 May Be	
Ameni	lect UBR is \$61.25				Trust Fund Contribution.		Added to Fees	
Make Check Pevable	officers A	ment of State	1 11.	<u></u>				
TITLE NAME	PTSD RODRIGUEZ, MAR		TITLE					
STREET ADDRESS	18100 N BAY ROA	\D, #506	HAME: :	ODRESS				
CITY-ST-ZIP TITLE	SUNNY ISLES BE	ACH, FL 33160	CITY:ST-Z	lp.				
NAME	1		NAME					
STREET ADDRESS CITY-ST-ZIP			STREET A					
TITLE			:::TITUE:::					
NAME STREET ADDRESS	•		NAME: STREET A	ODRESS:		1011		
CITY-ST-ZIP TITLE	·		CITY:ST-Z		DO NOT			
NAME	1		HAME		INTHIS	SP	ACE	
STREET ADDRESS CITY-ST-ZIP			STREET A					
TITLE			T(TLE:					
NAME STREET ADDRESS			STREET A	DDRESS:				
CITY-ST-ZIP			CITY-ST-Z	(P				
1 TITE								
TITLE NAME			. HAME:					
NAME STREET ADDRESS CITY-ST-ZIP			STREET A	ir in in				
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that t	he information supplied	with this filing does not q	STREET A CITY-ST-Z ualify for the exen	nption stated	in Section 119.07(3)(i), Fiorida	Statute	s. I further	
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that to certify that the inform as if made under cat	nation indicated on this i th; that I am an officer o	report or supplemental representations of the corporation of the corporations.	STREET A CITY ST-Z LUBILITY for the exen port is true and ac on or the receiver	nption stated curate and to ror trustee en	hat my signature shall have the npowered to execute this report	as requi	gal effect	
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the informas if made under cat	nation indicated on this i th; that I am an officer o	report or supplemental representations of the corporation of the corporations.	STREET A CITY ST-Z LUBILITY for the exen port is true and ac on or the receiver	nption stated curate and to ror trustee en	hat my signature shall have the	as requi	gal effect	
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the informas if made under cat	nation indicated on this i th; that I am an officer o	report or supplemental re or director of the corporation charme appears in Block 10	STREET A CITY ST-Z LUBILITY for the exen port is true and ac on or the receiver	nption stated curate and it or trustee entent with an	hat my signature shall have the npowered to execute this report	same le as requi wered.	gal effect	

ALIACHMENT

PO20000 4/5-2 TIMENTS TITANIUM, INC.

INVESTMENTS TITANIUM, INC. 7999 NW 53 STREET, SUITE 2 DORAL, FL 33166

May 5, 2006

Florida Department of State Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

Re: Petition to remove \$400.00 late filing of annual report for reasonable cause.

Dear Sir or Madam:

I was unable to file the annual report for my company Investments Titanium, Inc. by May 1, 2006 as my spouse was hospitalized after an emergency and I was unable to leave the hospital.

I petition that the Department accept my \$150.00 filing fee without late penalties for the above reasonable cause.

Sincerely,

Dragidant