

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90206 004 ***150.00

DOCUMENT # P02000041527

1. Entity Name
INVESTMENTS TITANIUM INC



Principal Place of Business

~~16010 NORTH BAY ROAD #207~~
~~SUNNY ISLES BEACH FL 33160~~

Mailing Address

~~16010 NORTH BAY ROAD #207~~
~~SUNNY ISLES BEACH FL 33160~~

2. Principal Place of Business

200 SE 1st Street

3. Mailing Address

200 SE 1st Street

Suite, Apt. #, etc.

510

Suite, Apt. #, etc.

510

City & State

Miami FL

City & State

Miami, FL

Zip

33131

Country

Zip

33131

Country

4. FEI Number

04-3644338

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

~~SANCHEZ, RAFAEL ROPA~~
~~16010 NORTH BAY ROAD #207~~
~~SUNNY ISLES BEACH FL 33160~~

7. Name and Address of New Registered Agent

Name

Augusto C. Quintanilla

Street Address (If Box Number is Not Acceptable)

200 SE 1st Street

Suite 510

City

Miami

FL

Zip Code

33131

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME QUINTANILLA, AUGUSTO C
STREET ADDRESS 17011 NORTH BAY RD, #207
CITY-ST-ZIP MIAMI FL 33196

TITLE VD ☒ Delete
NAME FOREMAN, KELLEY J
STREET ADDRESS 7442 ROOSEVELT STREET
CITY-ST-ZIP HOLLYWOOD FL 33024

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P, D ☒ Change ☐ Addition
NAME Augusto C. Quintanilla
STREET ADDRESS 200 SE 1st Street, Suite 510
CITY-ST-ZIP Miami, FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE U, P, D ☐ Change ☒ Addition
NAME Maria Quintanilla
STREET ADDRESS 200 SE 1st Street, Suite 510
CITY-ST-ZIP Miami, FL 33131

TITLE S, T, D ☐ Change ☒ Addition
NAME Rosa Ana Foreman
STREET ADDRESS 200 SE 1st Street, Suite 510
CITY-ST-ZIP Miami, FL 33131

TITLE D ☐ Change ☒ Addition
NAME Marta A. Lodeiro
STREET ADDRESS 200 SE 1st Street, Suite 510
CITY-ST-ZIP Miami, FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 information empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305-374-6003

CR2E034 (10/02)