42006 FOR PROFIT CORPORATIONANNUAL REPORT

FILED Apr 25, 2006 08:00 AN Secretary of State DOCUMENT # P03000083595 1. Entity Name TITUS STUCCO, INC. Principal Place of Business Mailing Address 95 BAY GROVE ROAD 95 BAY GROVE ROAD FREEPORT, FL 32439 FREEPORT, FL 32439 No Chg-P CR2E034 (11/05) 04112006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0123156 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TITUS, TAD W 95 BAY GROVE ROAD DO NOT WRITE FREEPORT, FL 32439 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. DIR TITLE TITUS, TAD W NAME 95 BAY GROVE ROAD STREET ADDRESS FREEPORT, FL 32439 CITY-ST-ZIP TITLE TITUS, AIMEE NAME U00000532279 DS/06/06-80076-018 150.00 95 BAY GROVE RD. STREET ADDRESS CITY -ST-ZIP FREEPORT, FL 32439 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7/P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 effect this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all officer like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/06

850/585-859/