## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000099303

Entity Name: THE T.I.T.O.S. COMPANY INC.

FILED Sep 04, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1250 LINCOLN ROAD 6693 COLLINS AVE.

SUITE 310 SUITE 253

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33141

Current Mailing Address: New Mailing Address:

1250 LINCOLN ROAD 6693 COLLINS AVE.

SUITE 310 SUITE 253

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33141

FEI Number: 20-0220416 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

UMPIERREZ, ALEXBARREIRO, PABLO A525 71 STREET6693 COLLINS AVE.

APT 4712 253
MIAMI BEACH, FL 33141 US MIAMI BEACH, FL 33141 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: PABLO BARREIRO 09/04/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 UMPIERREZ, ALEX
 Name:

 Address:
 525 71 STREET APT. 4712
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 BARREIRO, PABLO A
 Name:
 BARREIRO, PABLO A

 Address:
 1250 LINCOLN ROAD SUITE 310
 Address:
 6693 COLLINS AVE. APT. 253

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33141

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 MOLINERO, JOSE O
 Name:
 MOLINARO, JOSE O

 Address:
 1250 LINCOLN ROAD SUITE 310
 Address:
 625 MERIDIAN AVE, APT 4

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PABLO BARREIRO MR. 09/04/2005