2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 22, 2000 8:00 am Secretary of State DOCUMENT # **P22957** 1. Entity Name TITAN MARITIME INDUSTRIES, INC. 03-22-2000 90035 029 ***158.75 Principal Place of Business Mailing Address P.O. BOX 350465 410 SW 4 TERR FT. LAUDERDALE FL 33335-0465 DANIA FL 33004 628472 3. Mailing Address 2. Principal Place of Business Suite! Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2528369 Not Applicable Country Zip Country Zip **\$8.75** Additional M 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FAIRBANKS, RICHARD B. Street Address (P.O. Box Number is Not Acceptable) 410 SW 4 TERRACE **DANIA FL 33004** Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition PD Change TITLE ☐ Delete TITLE PARROT, DAVID G. NAME NAME 620 SAN MARCO DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Change ☐ Addition ☐ Delete TITLE TITLE FAIRBANKS, RICHARD B. NAME NAME 2637 AQUAVISTA BLVD. STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE Delete CHRIST, ELIZABETH S NAME NAME STREET ADDRESS 925 MANDARIN ISLE STREET ADDRESS CITY-ST-ZIP CITY-ST-71P FT LAUDERDALE FL ☐ Addition TITLE Change TITLE Delete WOOD, GUY C NAME NAME 3700 SW 132 AVE; #CB#42 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director weren to excurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if indicated on this report or supplemental report is

MARCH 15, 2000

of the corporation or the receiver or truste changed, or on an attachment with an age

YPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: