


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2005 08:00 AM
Secretary of State

DOCUMENT # P34958 1. Entity Name TITAN ROAD INDUSTRIAL PARK, INC.	
--	---

Principal Place of Business
2622 N.W. 23 WAY
BOCA RATON, FL 33431

Mailing Address
2622 N.W. 23 WAY
BOCA RATON, FL 33431



DO NOT WRITE IN THIS SPACE

03142005 No Chg-P CR2E034 (10/03)

4. FEI Number 84-1170018	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COGEN, JOSEPH
2622 N.W. 23 WAY
BOCA RATON, FL 33431

**DO NOT WRITE
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 _____

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDP COGEN, JOSEPH 2622 N.W. 23 WAY BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD COGEN, LEE 2622 N.W. 23 WAY BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST COGEN, LEE 2622 N.W. 23 WAY BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

000000266731
03/17/05-80042-005 150.00

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 like empowered.

SIGNATURE: _____

SIGNATURE OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-05

Date

5619948710

Daytime Phone #