2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P93000047771

TITAN CONSTRUCTION GROUP, INC.



Principal Place of Business

1401 SW 1 STREET

SUITE 212 MIAMI, FL 33135 Mailing Address

1401 SW 1 STREET SUITE 212

MIAMI, FL 33135

FILED Jan 13, 2006 08:00 AM Secretary of State



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1050006	No Cha D	CD2E024 (11/05)	

Applied For 4. FEI Number 65-0421953 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, SAMUEL 1401 SW 1 STREET SUITE 212 MIAMI, FL 33135

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	30.100			
	named entity submits this statement for the purpose of changing its registerions of registered agent.	ered office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE Signature, typed or printed name of registered agent and talle if applicable. (NOTE Registered Agent signature required when reinstating) DATE				
	E NOW!!! FEE IS \$150.00 9. Election Campaign Final Trust Fund Contribution			
10.	OFFICER'S AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIAZ, SAMUEL 1401 SW 1 STREET, SUITE 212 MIAMI, FL 33135			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIAZ, SAMUEL W. 1401 S.W. 1 ST., STE #212 MIAMI, FL	U00000385904 01/18/06-80035-022 158.75		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DIAZ, DENNYS 1401 SW 1ST STREET STE 212 MIAMI, FL	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADORESS CITY-ST-ZIP				
TITLE NAME				

12. Thereby certify that the information supplied with this filing 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 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:

STREET ADDRESS CiTY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

3057612018