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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000013867 (4)

1. Corporation Name

TITANIUM TRADE CORP.



Principal Place of Business

8888 NW 70th St.
MIAMI FL 33142

Mailing Address

3008 NW 70th St.
MIAMI FL 33142

3. Date Incorporated or Qualified
02/21/1994

3a. Date of Last Report
03/05/1996

2. Principal Place of Business

21. TITANIUM TRADE CORP.

Suite, Apt. #, etc.

22. 1978 N.W. 82 AVENUE
City & State

23. MIAMI, FLORIDA

24. Zip 33126

25. Country USA

2a. Mailing Address

26. TITANIUM TRADE CORP.

Suite, Apt. #, etc.

27. 1978 N.W. 82 AVENUE
City & State

28. MIAMI, FLORIDA

29. Zip 33126

30. Country USA

4. FEI Number

65-0474333

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MEDEI, RAUL GUILLERMO
5775 COLLINS AVE. APT. 501
MIAMI FL 33140

10. Name and Address of New Registered Agent

81. Name

MEDEI, RAUL GUILLERMO

82. Street Address (P.O. Box Number is Not Acceptable)
1978 N.W. 82 AVENUE

83.

84. City

MIAMI

FL

85. Zip Code

33126

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of officer, director, or registered agent and title is acceptable.)

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD
NAME MEDEI, RAUL GUILLERMO
STREET ADDRESS 5775 COLLINS AVE. APT. 501
CITY- ST- ZIP MIAMI FL 33140

TITLE V
NAME MEDEI, RAUL GUILLERMO
STREET ADDRESS 5775 COLLINS AVE. APT. 501
CITY- ST- ZIP MIAMI FL 33140

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE PSTD
12. NAME MEDEI, RAUL GUILLERMO
13. STREET ADDRESS 1978 N.W. 82 AVENUE
14. CITY- ST- ZIP MIAMI, FLORIDA 33126

21. TITLE V
22. NAME MEDEI, RAUL GUILLERMO
23. STREET ADDRESS 1978 N.W. 82 AVENUE
24. CITY- ST- ZIP MIAMI, FLORIDA 33126

31. TITLE
32. NAME
33. STREET ADDRESS
34. CITY- ST- ZIP

41. TITLE
42. NAME
43. STREET ADDRESS
44. CITY- ST- ZIP

51. TITLE
52. NAME
53. STREET ADDRESS
54. CITY- ST- ZIP

61. TITLE
62. NAME
63. STREET ADDRESS
64. CITY- ST- ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13, unchanged, or as an attachment with an address

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAUL G. Medei 01/10/97 (305) 471-9600

Date

Daytime Phone #

CR2E034 (9/96)