

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 17 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000029169 (7)

1. Corporation Name

AGRI-ENERGY SYSTEMS, INC.

TITAN MANAGEMENT GROUP, INC.

Principal Place of Business

1055 SIENA OAKS CIRCLE EAST
PALM BEACH GARDENS FL 33410

Mailing Address

1055 SIENA OAKS CIRCLE EAST
PALM BEACH GARDENS FL 33410

600001459266
-04/18/95--01091--008
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

04/18/1994

4. FEI Number

05-0481861

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

2. Principal Place of Business

21 4128 CATAPHA AVE

Suite, Apt. #, etc.

22

City & State

23 P.B.G., FL

Zip

24 33410

Country

25 Palm Beach

2a. Mailing Address

26 P.O. Box 32623

Suite, Apt. #, etc.

27

City & State

28 Palm Beach Gardens, FL

Zip

29 33420-2632

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

William F. Quinon III

82 Street Address (P.O. Box Number is Not Acceptable)

4128 CATAPHA AVE

83

84 City

P.B.G.

FL

85 Zip Code

33410

11. Pursuant to the provisions of Sections 607.05(3) and 607.15(18), Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office (s), 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 607.05(5), Florida Statutes.

SIGNATURE

William F. Quinon III

William F. Quinon III

1-23-95

12. OFFICERS AND DIRECTORS

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

P
BAILEY, JOHN
1055 SIENA OAKS CIRCLE EAST
PALM BEACH GARDENS FL 33410

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

P
Quinon III, William F.
4128 CATAPHA AVE
PALM BEACH GARDENS FL 33410

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

12.1 TITLE

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12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

President-AT
William F. Quinon III
4128 CATAPHA AVE
PBG FL 33410

Change

Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

Secretary
William F. Quinon III
4128 CATAPHA AVE
PBG FL 33410

Change

Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

Treasurer
William F. Quinon III
4128 CATAPHA AVE
PBG FL 33410

Change

Addition

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.1 TITLE

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13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 if changed, or on an attachment with an address.

SIGNATURE

William F. Quinon III

William F. Quinon III

1-23-95

(407) 244-7925

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Signature)