

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000048395

Entity Name: TITCO CORPORATION

FILED
Jan 05, 2009
Secretary of State

Current Principal Place of Business:

1715 NORTH STATE ROAD 7
POMPAN0 BEACH, FL 33068 US

New Principal Place of Business:

1715 NORTH STATE ROAD 7
MARGATE, FL 33063 US

Current Mailing Address:

1715 NORTH STATE ROAD 7
POMPAN0 BEACH, FL 33068 US

New Mailing Address:

1715 NORTH STATE ROAD 7
MARGATE, FL 33063 US

FEI Number: 65-0502866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIKOL, ROSE MARIE
TITCO CORPORATION
5100 W. COPANS ROAD, SUITE 910
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

KIKOL, ROSE MARIE
1715 NORTH STATE ROAD 7
MARGATE, FL 33063 US

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:

01/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VEGA, LAURA C
Address: 12433 SW 8TH CT
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: ROBAU, LISA M
Address: 10121 SW 18TH ST
City-St-Zip: DAVIE, FL 33324

Title: D () Delete
Name: KIKOL, KARLA A
Address: 12081 NW 2 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: KIKOL, ROSE M
Address: 2141 NW 76TH TER
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: DONALD, KIKO L
Address: 1715 NORTH STATE ROAD 7
City-St-Zip: POMPAN0 BEACH, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DONALD, KIKOL L
Address: 1715 NORTH STATE ROAD 7
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSE MARIE KIKOL

PRES

01/05/2009

Electronic Signature of Signing Officer or Director

Date