## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P95000031132 DOCUMENT #

1. Entity Name

SIGNATURE:

TITAN SERVICES, INC.



## **FILED** Feb 11, 2003 8:00 am Secretary of State 02-11-2003 90078 037 \*\*\*158.75

					A COO WE I						
Principal Place of Business 410 SW 4TH TERRACE DANIA FL 33004		Mailing Address P.O. BOX 350465 FT LAUDERDALE FL 33335				(	<b>fi a</b> fhir <b>se</b> ini <b>se</b> in	<b>. 11</b>     11   12   13   14   15   15   15   15   15   15   15	f <b>ið</b> a fi <b>alo</b> k ál <b>og</b>	<b>1</b> Mari   180   180	
2. Principal F	Place of Busin	ess	3. Mailing Add	dress							
Suite, Apt.	. #, etc.		Suite, Apt. #	ŧ, etc.				EOK LIEDE I	5		_
0. 10								HECK HERE I	F MAKING	CHANGE:	) 
City & State		City & State			4	4. FEI Number 65-0574895				opplied For Not Applicable	
Zip		Country	Zip		Country	5	. Certificate of Sta	us Desired	×	\$8.75 Ac	
	6. Name	and Address of Current	Registered Agen	<u>t     -                                </u>		7.	Name and Addre	ss of New Re	gistered	Agent	
CAIDDANIU	C DICUADO	. D			Name						
	(S, RICHARD				Street Add	ress (P.O.	. Box Number is No	t Acceptable)	.,	1 2 1	
	TH TERRACI	<b>:</b> .					••	• •		, ,	
DANIA FL	33004	.3									
		% \$			City				FL	Zip Co	de
8. The above	named entity	submits this statement fo	or the purpose of c	hanging its re	egistered office or re	oistered a	agent, or both, in th	e State of Flor		amiliar with	and accept
the obligat	tions of registe	red agent.							7000	arring, ivi	, and accept
SIGNATURE .		. 7									
OIGINATORE.	Signature, typed o	r printed name of registered agent	and title if applicable.	(NOTE: I	Registered Agent signature r	equired wher	n reinstating)		DATE		
_	ILE NOWIII	FEE IS \$150.00	i i				·1				
Afte	r May 1, 200	Fee will be \$550.00 Florida Department of	f State					Campaign Fina d Contribution			<b>00</b> May Be od to Fees
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After Make Check 10.	r May 1, 200 k Payable to DP	3 Fee will be \$550.00 Florida Department of OFFICERS AND	DIRECTORS	Delete	11.	A	Trust Fund	d Contribution		Adde	d to Fees
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After Make Check 10. TITLE NAME STREET ADDRESS	r May 1, 200 k Payable to DP PARROT, D 620 SAN M	3 Fee will be \$550.00 Florida Department of OFFICERS AND AVID ARCO DRIVE	DIRECTORS	Delete	TITLE NAME STREET ADDRESS	A	Trust Fund	d Contribution		DIRECTOR	d to Fees
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After Make Check 10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP PARROT, D. 620 SAN M. FT LAUDER	3 Fee will be \$550.00 Florida Department of OFFICERS AND AVID ARCO DRIVE DALE FL 33301	DIRECTORS	Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	A	Trust Fund	d Contribution		DIRECTOR	d to Fees
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2/06/03