FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000035442 (8)

TITAN BUILDERS, INC.

Principal Place of Business

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1

Mailing Address

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PALM BEAC	OOD AVE H GARDENS FL 33410-4758	3941 DOGWOOD AVE PALM BEACH GARDENS FL	. 33410-4756		
				3. Date Incorporated or Qualified 3a. 04/22/1996	Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0660895	Not Applicable
Suffe, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & St	ate	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zıp	Country 30	8. This corporation has liability for intangil	ble tax under s. 199.032,
<u></u>	9. Name and Address of Cu		JO ₁	10, Name and Address of New Registers	
8/	AULS, EUGENE B		81 Name		
<u>^</u> 15	5202 SW 155 TERRACE		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
√. MI	IAMI FL 33187		83		
•					
			84 City	F	
11. Pursuar office of agent. I	nt to the provisions of Sections 607 r registered agent, or both, in the S I am familiar with, and accept the o	.0502 and 607.1508, Florida Statute tale of Florida. Such change was a bligations of, Section 607.0505, Flor	s, the above-named co uthorized by the corpor- ida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE		ALCONO.		uired when (einstating) DATE	
12,	Signature, typed or printed name of registere	AND DIRECTORS	Registered Agent signature req	ADDITIONS/CHANGES TO OFFICERS A	
TITLE		CASSIFEY DELETE	1.1 TITLE	ADDITIONS/OFFIAINGED TO OFFIGERS A	Change Addition
NAME		we Je	1.2 NAME		
STREET ADDRESS	(() () () () () () () () ()		1.3 STREET ADDRESS		
CITY-ST-ZIP	0.00	5410	1.4 CITY-ST-ZIP	and the second s	4000 <u>—</u> —വ
TITLE	Secretary	DELETÉ	2.1 TITLE		A Ghange A Addition
NAME	RONAL Reger	سر	2.2 NAME	~U!/1U/31~ ****105	0 ****165.00
STREET ADDRESS		ing DC	2.3 STREET ADDRESS	****103.U	0 ****100,00
Offy-ST-ZW	WOB, FL 33	406	2 4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME #			3.2 NAME		
STREET ADMRESS	s (3.3 STREET ADDRESS		
CITY-ST-			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	5		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME	;		5.2 NAME		
STREET ADDRESS	S		5.3 STREET ADDRESS		_
CITY-ST-ZIP		TT perce	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Addition
NAME			6.2 NAME		1711
STREET ADDRESS	S .		6.3 STREET ADDRESS		
CITY-ST-24P			6 A CITY - ST - 7IP		~

14. 1 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 if changed, or on an attachment with an address.